

**A herding clinic with Diane Sobel-Meyer at Keepstone Farm on May 11-12, 2019.**

**Sponsored by *Working Aussies of Virginia*. Entries open February 11, 2019. A waitlist will be kept.**

**Limit:** 12 working slots; Unlimited auditing slots.

**Stock:** Sheep, ducks, and cattle will be available. Please indicate on your application which stock you prefer.

**Accommodations:** There are a number of dog friendly hotels located nearby in Berryville and Winchester VA.

**Other Information:**

- Dogs must be on leash at all times unless working. No exceptions.
- All dogs must have current Rabies vaccinations.
- The clinic will begin at 8:00 a.m. each day. Please plan to arrive no later than 7:45 a.m.
- Breakfast (bagels, donuts, etc.) will be available each morning. Water will be available during the day. Lunch will be provided each day as well.

**Cost:** 2-day clinic is \$300.00 (\$200.00 WAV members). Preference will be given to those signing up for both days. Auditing is \$50.00/day (\$30.00 WAV members). Payment must accompany registration to reserve a working slot.

Working slots are limited to one per handler. If you are splitting your slot between 2 dogs please indicate that on your application. If you have any questions, please contact Regina Bures at [bellewoodsheep@gmail.com](mailto:bellewoodsheep@gmail.com). Please make checks payable to Working Aussies of Virginia and mail to: Regina Bures, 38177 Britain Rd, Lovettsville, VA 20180

**Cancellations after April 19, 2019 will only be given a refund if someone takes your place.**

Handler/owner releases Working Aussies of Virginia (including its officers, directors, members, and event organizing committee), and Keepstone Farm (property owned by Susan Rhoades and Lisa Jett) harmless from all present and future loss, injury, damage, claims, demands and liabilities involving the entered dog, the clinic, or clinic premises. Without limiting the generality of the foregoing hold harmless provisions, handler/ owner hereby specifically assume sole responsibility for, and agree to indemnify and save aforementioned parties harmless from, any and all loss and expenses (including legal fees) by reason of the liability imposed by law upon any of the aforementioned parties for damages because of bodily injuries, including death, at any time in consequence of my (our) participation in this event; howsoever such injury, or death, may be caused, and whether or not the same may have been caused, or may have been alleged to have been caused, by negligence of the aforementioned parties or any of their employees or agents, or any other persons. Handler/owner agrees to pay for any damages to livestock or said property that is caused by themselves or their dog(s).

**I have read, understood, and acknowledge the above Agreement.**

Name \_\_\_\_\_

Signature \_\_\_\_\_

Date: \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_

\_\_\_\_\_

E-mail \_\_\_\_\_

Working Slot -or-  Auditing

Dog's Call Name \_\_\_\_\_

Dog's Age \_\_\_\_\_

Breed \_\_\_\_\_

Working level \_\_\_\_\_

Stock preferred \_\_\_\_\_

Additional comments: \_\_\_\_\_

# WORKING AUSSIES OF VA

## Application for Membership

NEW MEMBER \_\_\_\_\_ Year \_\_\_\_\_ RENEWAL \_\_\_\_\_ Year \_\_\_\_\_

Type of Membership: Single \_\_\_\_\_ Family \_\_\_\_\_ Junior \_\_\_\_\_

Name(s) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone: Home \_\_\_\_\_ Cell \_\_\_\_\_

Email Address: \_\_\_\_\_

ASCA Membership Number (if member) \_\_\_\_\_

Areas of Interest (Check all that apply):

\_\_\_\_\_ Conformation      \_\_\_\_\_ Stockdog      \_\_\_\_\_ Agility  
\_\_\_\_\_ Obedience      \_\_\_\_\_ Tracking      \_\_\_\_\_ Other \_\_\_\_\_  
list

Any other pertinent information you would like to be considered in the review of your application:

\_\_\_\_\_

\_\_\_\_\_

Dues enclosed: \_\_\_\_\_

Single Membership is \$24.00 per year.

Family Membership is \$24.00 for first member, \$12.00 each addit. member from same residence.

Junior Membership (under age 18) is \$12.00. This is a non-voting membership.

Make checks payable to Working Aussies of VA and mail to: Robin Carneal , Treasurer

19493 Courtney Road

Hanover, Va. 23069

By signing this application, I/we agree to abide by the Constitution, Bylaws, Rules, Regulations, Code of Ethics and Dispute rules of both ASCA and the Working Aussies of VA.

\_\_\_\_\_  
Signature(s)

\_\_\_\_\_  
Date

Date Received \_\_\_\_\_ Amount Received \$ \_\_\_\_\_