

GERMAN WIREHAired POINTER CLUB OF AMERICA

A.K.C. MEMBER



HUNTING TEST PREMIUM LIST

Ionia Recreational Area
Ionia, MI
MONDAY, OCTOBER 4, 2021

Hunting Test Open to All Pointing Breeds

This Hunting Test is held under Rules and Procedures of the
AMERICAN KENNEL CLUB

MAIL ADVANCE ENTRIES WITH PAYMENT TO:

Make Checks Payable to GWPCA

Send to: Beth Schmidt, Secretary
12511 280th Ave.

Trevor, WI 53179

(262)705-4162 agilemax9032@gmail.com

ALL ENTRIES MUST BE PAID PRIOR TO RUNNING OF THE DOG

ENTRIES WILL CLOSE AT 6:00 PM (CDT), WEDNESDAY,
September 8, 2021

with the Hunting Test Secretary, at 12511 280th Ave., Trevor WI 53179

DRAWING WILL TAKE PLACE AT 6:00 PM (CDT),
WEDNESDAY, September 8, 2021
at 12511 280th Ave., Trevor WI 53179

**GERMAN WIREHAired POINTER CLUB OF
AMERICA
OFFICERS AND BOARD**

President	.....	Liz Dixon
Vice President	.....	Ray Calkins
Treasurer	.....	Lee Freiss
Secretary	.....	Stacy Risler
		3809 37th Street
		Elk Mound, WI 54739-4091
		gwpcamail@gmail.com
Regional Directors	.....
East	.....	Mike Braddock
Midwest	.....	Linda Smith
West	.....	TBD

HUNT TEST COMMITTEE

Thomas Jarnich, Chairman, PO Box 750, Riverhead NY 11901

Kay Braddock Chuck Casanova

Debby Darby Roger Doyle

Steven Kreuser

OFFICIAL GUNS Randal Piette

ACCOMMODATIONS IN THE AREA

Please check pet acceptance requirement with each hotel!

Super 8 by Wyndham Ionia, 7245 S. State, Ionia MI 616-597-6974

American Inn & Suites, 423 Brown Blvd, Ionia MI 616-527-2200

Mid-Way Motel, 7076 S. State Rd, Ionia MI 616-527-6570

JUDGES AND STAKES TO BE JUDGED

MONDAY, OCTOBER 4, 2021

MASTER, SENIOR, JUNIOR

Laura Myles #48767 21526 W. Lost Lake Rd, Snohomish, WA 98296

Camille A. Rice #30868 10621 190th Ave., PO Box 2226, Leroy, MI 49655-

TESTS, SCHEDULE AND ENTRY FEES

Master Hunting Test	8:00 A.M, Monday, October 4, 2021	\$50.00
Senior Hunting Test	To Follow Master Hunting Test	\$50.00
Junior Hunting Test	To Follow Senior Hunting Test	\$45.00

* * *

COURSES AND BIRDS

All tests shall be run on a single course with a bird field. Chukar
and/or quail

shall be released in all test levels. Each participant and the officials involved in
Senior and/or Master Hunting Test shall wear a blaze orange colored article of
clothing.

* * *

TRACKING COLLARS

AKC-APPROVED TRACKING COLLARS MAY BE USED IN ACCORDANCE
WITH RULES ESTABLISHED BY THE AMERICAN KENNEL CLUB

PRIZES

Standard AKC Rosettes awarded to all dogs receiving a
qualifying score.

Local Ionia Services

Sterner Veterinary Clinic
Room
575 Apple Tree Drive
616-527-3320

Sparrow Ionia Hospital Emergency

3565 S. State Road
616-523-1400

OFFICIAL AMERICA KENNEL CLUB ENTRY FORM

Note: This Entry Form Must Be Completed in Full

GERMAN WIREHAired POINTER CLUB OF AMERICA - Hunt Test 2021009806

October 4, 2021

IONIA RECREATION AREA; Ionia, MI

Entries close: Wednesday, September 8, 2021

Send entry with fees to: GWPCA c/o Beth Schmidt, Secretary
12511 280th Ave, Trevor, WI 53179

Enter in stake:		Event No.: 2021009806	
<input type="checkbox"/> AKC No.	SEX <input type="checkbox"/> Male <input type="checkbox"/> Female	I enclose entry fees In the amount of: \$	
Full Name of Dog:			
Breed:		Call Name:	Date of Birth:
Sire:			
Dam:			
Name of Breeder:			
Actual Owner(s):			
Owner's Address:			
City:		State:	Zip:
Name of Owner's Agent/Handler:			
Agent/Handler's Address:			
City:		State:	Zip:

AKC Rules, Regulations, Policies and Guidelines are available on the American Kennel Club website:

www.akc.org

AGREEMENT

I (we) agree that the club holding this event has the right to refuse this entry for cause which the club shall deem sufficient. In consideration of the acceptance of this entry and of the holding of this event and of the opportunity to have the dog judged and to win prizes, ribbons, or trophies. I (we) agree to hold the AKC, the event-giving club, their members, directors, governors, officers, agents, superintendents or event secretary and the owner and/or lessor of the premises and any provider of services that are necessary to hold this event and any employees or volunteers of the aforementioned parties, and any AKC approved judge, judging at this event, harmless from any claim for loss or injury which may be alleged to have been caused directly or indirectly to any person or thing by the act of this dog while in or about the event premises or grounds or near any entrance thereto, and I (we) personally assume all responsibility and liability for any such claim, and I (we) further agree to hold the aforementioned parties harmless from any claim for loss, injury or damage to this dog.

Additionally, I (we) hereby assume the sole responsibility for and agree to indemnify, defend and save the aforementioned parties harmless from any and all loss and expense (including legal fees) by reason of the liability imposed by law upon any of the aforementioned parties for damage because of bodily injuries, including death at any time resulting therefrom, sustained by any person or persons, including myself (ourselves), or on account of damage to property, arising out of or in consequence of my (our) participation in this event, however such, injuries, death or property damage may be caused, and whether or not the same may have been caused or may be alleged to have been caused by the negligence of the aforementioned parties or any of their employees, agents, or any other persons. **I (WE) AGREE THAT ANY CAUSE OF ACTION, CONTROVERSY OR CLAIM ARISING OUT OF OR RELATED TO THE ENTRY, EXHIBITION OR ATTENDANCE AT THE EVENT BETWEEN THE AKC AND MYSELF (OURSELVES) OR AS TO THE CONSTRUCTION, INTERPRETATION AND EFFECT OF THIS AGREEMENT SHALL BE SETTLED BY ARBITRATION PURSUANT TO THE APPLICABLE AKC BYLAWS, RULES, REGULATIONS AND PROCEDURES MUST FIRST BE FOLLOWED AS SET FORTH IN THE AKC CHARTER AND BYLAWS, RULES, REGULATIONS, PUBLISHED POLICIES AND GUIDELINES.**

SIGNATURE OF OWNER OR HIS AGENT DULY AUTHORIZED TO MAKE THIS ENTRY:

Phone: _____ E-Mail Address: _____

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Full Name of Dog:			
Breed:		Call Name:	Date of Birth:
Sire:			
Dam:			
Name of Breeder:			
Actual Owner(s):			
Owner's Address:			
City:		State:	Zip:
Name of Owner's Agent/Handler:			
Agent/Handler's Address:			
City:		State:	Zip:

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