



CANINE SPORTS UNLIMITED WORKING DOGS OF AMERICA TRIAL

TRIAL DATE	July 19, 2025	LOCATION	3448 State Highway 10 Johnstown, NY 12095
FEE PER CLASS	\$55.00 - Obedience only \$65.00 - Protection	JUDGE	John Martorelli
ENTRY DEADLINE	July 16, 2025	DECOY	TBA
MAIL ENTRY FORM AND FEE TO:	Canine Sports Unlimited 351 Oriskany Blvd Whitesboro, NY 13492 <i>Make checks payable to Canine Sports Unlimited</i>	CONTACT	Laura Yaghy 315-736-2436 caninesports@hotmail.com

Entries will be accepted until 9:00 am on trial day if space is available. Entry fees will only be refunded if trial has been canceled..

All dogs must be registered with WDA at least one week prior to the trial date. [Click here to register a dog.](#)

DOG'S REGISTERED NAME: _____

DOG'S CALL NAME (if different): _____

DOG'S WDA REGISTRATION #: _____

BREED: _____ SEX Male Female

COAT COLOR: _____

DATE OF BIRTH: _____

CURRENT TITLE/DEGREE(S): _____

SIRE'S NAME: _____

DAM'S NAME: _____

OWNER'S NAME: _____

HANDLER'S NAME: _____

OWNER'S ADDRESS: _____

CITY/STATE/ZIP: _____

TELEPHONE: _____ Email _____

Check one per entry form:

Obedience Titles

Protection Titles

FO OB1 OB2 OB3

P1 PD1

RELEASE: I (we) the undersigned and all those who accompany me (us) hereby agree to waive and release Working Dogs of America, Canine Sports Unlimited, its employees, officers, members, agents, all property owners of said event from any and all liability of any nature for loss, injury or damage which I (we) or my dog(s) may cause or suffer, while in/on the event grounds or near any entrance thereto to myself or my dog(s) and all those that accompany me to this event. I CERTIFY that I am the actual owner of the dog, or that I am the duly authorized agent of the actual owner whose name I have entered above. In consideration of the acceptance of this entry, I (we) agree to abide by the rules and regulations of the Working Dogs of America organization in effect at the time of this event

OWNER/HANDLER SIGNATURE: _____ DATE: _____

