GAZEHOUNDS OF NEW ENGLAND Stephanie Pumphrey, Field Trial Secretary 51 Birch Hill Road Stow, MA 01775 Stephanie.pumphrey@tufts.edu 617-504-6839

> DIRECTIONS TO THE FIELD & ACCOMODATIONS -- see insert after course plans --

# PLEASE BRING SHADE & WATER FOR YOUR HOUNDS!

Lunch and breakfast for sale on site: K'S KART TOO

\*\* ASFA Certifications done on Saturday AFTER the trial is over \$15 \*\* \*\* Practice Runs done on Saturday AFTER the trial is over \$5/run \*\*

## PLEASE NOTE DOCUMENT REQUIREMENTS!

A photocopy of acceptable registry, certification, and/or proof of title must be submitted with each hound's first ASFA entry or field trial, <u>including those with AKC</u> or CKC points that have not entered an ASFA event. Please familiarize yourself with the ASFA Running Rules found at <u>www.ASFA.org</u> for more information. It is the handler's responsibility to include correct documents with the entry. Please ensure that the appropriate "first-time" boxes are checked on the entry form.

# PREMIUM LIST





## ASFA REGION 9 ALL BREED LURE COURSING TRIALS and BORZOI CLUB OF AMERICA SUPPORTED TRIALS

Saturday & Sunday, October 19 & 20, 2024

<u>Kinnie Farm</u> 2139 Glasgo Road; Griswold, CT

EARLY ENTRIES CLOSE 6 p.m. THURSDAY, OCTOBER 17, 2024 at the FTS address: First entry: \$24, additional entries: \$20

No telephone or email entries!

Entries will not be acknowledged!

GATE ENTRIES AND SUBSTITUTIONS (same owner) CLOSE ½ hour before Roll Call at the FTS desk – All gate entries: \$27.

TRIAL HOURS: 7:00 AM until completed

ROLL CALL: 8:00 AM, all breeds!

Permission has been granted by the American Sighthound Field Association for the holding of this event under American Sighthound Field Association Rules and Regulations.

Samantha Duryee, Chair, A.S.F.A. Scheduling Committee

Go to <u>www.ASFA.org</u> for online Rulebook, Policies, Contacts, Clubs, Trial Schedules, Trial Results & more.

#### GAZEHOUNDS OF NEW ENGLAND - OFFICERS AND DIRECTORS

President: Jo-An Courtemanche; Vice President: Cricket Potter; Secretary: Stephanie Pumphrey; Treasurer: Ben Brodeur; Directors: D Pei Wu, Bill Wimsatt, Pam Buswell, Karen Harvey, ASFA Delegate: Clay Leslie

#### JUDGES AND ASSIGNMENTS

Richard Whritenour (RW): 381 Elwood Road; Starkville, NY 13339 Ian Davies (ID): 5300 Zebulon Road; Macon, GA 31210 Don White (DW): 5599 Grove City Road; Grove City, OH 43123

\* - Provisional judge, + - Canadian judge.

Saturday:

|    | AH | AZ | BA | BZ | CI | GH | IB | IW | IG | LCI | PH | Pvl | RR | SA | SD | SL | Sng | SW | WH |
|----|----|----|----|----|----|----|----|----|----|-----|----|-----|----|----|----|----|-----|----|----|
| DW | х  |    |    | Х  |    |    | х  |    |    |     | х  |     |    | Х  |    |    |     |    | х  |
| ID |    | х  |    |    | Х  |    |    | х  |    |     |    | х   |    |    | Х  |    | х   |    |    |
| RW |    |    | х  |    |    | х  |    |    | х  | х   |    |     | х  |    |    | х  |     | х  |    |

Sunday:

| ſ |    | AH | AZ | BA | BZ | CI | GH | IB | W | IG | LCI | PH | Pvl | RR | SA | SD | SL | Sng | SW | WH |
|---|----|----|----|----|----|----|----|----|---|----|-----|----|-----|----|----|----|----|-----|----|----|
| ſ | DW |    |    | х  |    | х  |    |    | х |    | х   |    | х   |    |    | х  |    |     | х  |    |
| [ | ID | Х  |    |    |    |    | Х  |    |   | х  |     |    |     | х  |    |    | Х  |     |    | х  |
|   | RW |    | х  |    | х  |    |    | х  |   |    |     | х  |     |    | х  |    |    | х   |    |    |

#### FIELD COMMITTEE

Field Trial Chairperson: Jeff Kimmelman

Field Trial Secretary: Stephanie Pumphrey; 51 Birch Hill Road; Stow, MA 01775;

stephanie.pumphrey@tufts.edu; Phone on field only: 617-504-6839 Lure Operators: B. Brodeur, C. Leslie, C. Potter, B. Wimsatt, R. Whritenour, D. White, I Davies Field Clerks: J. Courtemanche, I. Kimmelman, L. Buzzell, S. Leslie, D. Johnson, P. Buswell Huntmasters: B. Brodeur, C. Leslie, S. Seay, B. Wimsatt, D. Wu, D. White, I. Davies Inspection: J. Courtemanche, I. Kimmelman, M. Brodeur, L. Buzzell, S. Leslie, P. Buswell

#### **RIBBONS & TROPHIES**

#### Ribbons and Rosettes provided by GONE both days:

 Placement ribbons: First=Blue, Second=Red, Third=Yellow, Fourth=White, NBQ=Green

 Best of Breed: Purple/Gold Rosette
 Best in Field: Red/White/Blue Rosette

 High Score Single: Navy/Gold Rosette
 High Score LCI: Multi-colored Rosette

 Borzoi Best of Breed: Medallion from BCOA
 Borzoi Best Opposite Sex: Fun award

 High Score Single Borzoi: Fun award
 Borzoi Turtle: Fun award

#### EMERGENCY VETERINARIANS - PLEASE CALL AHEAD!

Ocean State Veterinary Hospital: 1480 South County Trail, East Greenwich, RI 02818 401-886-6787

#### ELIGIBLE BREEDS AND REGISTRY

Only purebred Afghan Hounds, Azawakhs, Basenjis, Borzoi, Cirneco dell'Etna, Greyhounds, Ibizan Hounds, Irish Wolfhounds, Italian Greyhounds, Pharaoh Hounds, Rhodesian Ridgebacks, Salukis, Scottish Deerhounds, Silken Windhound, Sloughis, Whippets may be entered in the regular stakes. Provisional breeds may be entered in the Provisional Stake or the Singles Stake. Provisional breeds currently include purebred Chart Polski, Galgo Español, Magyar Agar, Peruvian Inca Orchid,

Portuguese Podengo (Pequeno), Portuguese Podengo (Medio & Grande), and must be individually registered with the appropriate registry.

All entries shall be individually registered with the AKC (ILP/PAL included), the National Greyhound Association (NGA), the UKC, the Federation Cynologique (FCI), an ASFA-recognized foreign or ASFA Board approved registry or possess a critique registration number (CRN) from the Society for the Perpetuation of Desert Bred Salukis (SPDBS). A photocopy of the acceptable registry must be submitted with each hound's first ASFA field trial entry. This requirement is waived for hounds registered with the NGA.

### STAKES OFFERED

**OPEN STAKE:** Any eligible sighthound, excluding ASFA Field Champions of record, that has met certification requirements.

FIELD CHAMPION STAKE: Any ASFA Field Champion

**VETERAN STAKE:** Any eligible hound whose age is at least six years, except Irish Wolfhounds whose age shall be at least five years, and Afghan Hounds, Ibizan Hounds, Ridgebacks, Salukis & Whippets whose age shall be at least seven years, that has obtained an ASFA certification, AKC QC, or other qualifying waivers prior to the closing date. A copy of the certificate MUST be submitted with the entry forms. Points go toward V-FCh or V-LCM titles.

**PROVISIONAL STAKE:** Any eligible sighthound of a Provisional breed that has met certification requirements. Not eligible to compete in Best of Breed or Best in Field.

**SINGLES STAKE:** Any eligible sighthound including those disqualified to run in other stakes. Each hound runs alone. Not eligible for Best of Breed or Best in Field. Hounds are eligible to earn TCP and CPX titles from the Singles stake. Provisional breeds are not eligible for these titles.

LURE CHASING INSTINCT (LCI) STAKE: Open to NON sighthounds and sighthound mixes. All entries shall be individually registered with the AKC (including ILP & PAL) or the UKC. A photocopy of the acceptable registry must be submitted with each dog's first ASFA field trial entry. Dogs without a recognized registry number may obtain an ASFA ID number for a \$10 registration fee at time of entry.

**Small Open:** for dogs 17-1/2 inches or less at the withers and/or brachycephalic ("flat-faced") dogs who have not achieved the title of LCC.

**Small Excellent**: for dogs 17-1/2 inches or less at the withers and/or brachycephalic dogs who have achieved the title of LCC.

**Small Veteran**: for dogs 17-1/2 inches or less at the withers and/or brachycephalic dogs over the age of 7 years.

Large Open: for dogs over 17-1/2 inches at the withers who have not achieved the title of LCC. Large Excellent: is for dogs over 17-1/2 inches at the withers who have achieved the title of LCC. Large Veteran: for dogs over 17-1/2 inches at the withers who are over the age of 7 years. Sighthound Mix Open: for dogs with a sighthound breed in its background who have not achieved the title of LCC.

**Sighthound Mix Excellent**: for dogs with sighthound breed in its background who have achieved the title of LCC.

**Sighthound Mix Veteran**: for dogs with sighthound breed in its background over the age of 7 years.

When running as a stake within a regular ASFA trial, Small will run 50% of the ASFA course as laid out for the sighthounds up to a maximum of 400 yards. All other stakes will run the full ASFA laid out course length.

#### **CONDITIONS OF ENTRY**

All entries must be one year or older on the day of the trial • Stakes will be split into flights by public random draw if the entry in any regular stake is 20 or more • Bitches in season, hounds with breed disqualifications and lame hounds will be excused at roll call. • Spayed, neutered, monorchid or cryptorchid hounds without breed disqualifications may be entered; hounds with breed disqualifications are not eligible to enter except in the Single Stake • Hounds not present at the time of roll call will be scratched • All hounds will run twice, in trios if possible or braces (except in the Single Stake and LCI), unless excused, dismissed or disqualified.

#### EQUIPMENT

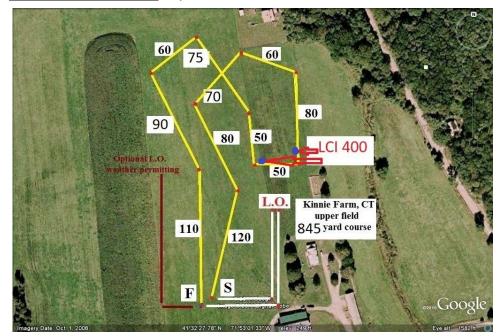
Type of lure machine: Gasoline or battery-powered continuous-loop system. • Type of lures: highly visible white plastic strips • Back-up equipment will be available.

The course will be reversed for the finals, run-offs, Best of Breed, Best in Field, and Best in Event. • The Field Committee reserves the right to alter the course plan as required by weather and/or field conditions on the day of the trial. • Participants should provide their own shade, water and food. • There will be a \$5 fine for any hound loose on the field during another hound's course and for participants not cleaning up after their hounds.

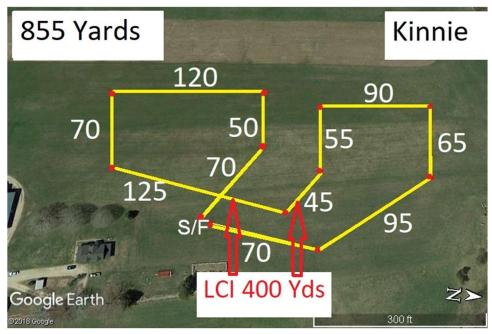
#### **BCOA SUPPORTED TRIAL ENTRY**

The BCOA (Borzoi Club of America) will hold its supported trial entries on both Saturday and Sunday. Special trophies will be offered for Borzois as listed in the "Ribbons & Trophies" section above.

COURSE PLAN, SATURDAY: 845 yards, reversed for final courses, runoffs, BOB & BIF



COURSE PLAN, SUNDAY: 855 yards, reversed for final courses, runoffs, BOB & BIF



#### **ACCOMMODATIONS**

#### \*\*Overnight camping on the field is permitted (no hook-ups) - trailers & RVs\*\*

Quality Inn: 48 Whitehall Ave, Mystic CT 860-980-3257 Pet Fee per night

Days Inn by Wyndham: 55 Whitehall Ave, Mystic, CT 860-572-0574

Oakdell Motel: 93 Hartford Turnpike, Waterford, CT 860-442-9446

Motel 6: 269 Flanders Rd, Niantic, CT 860-739-6991 \*\*\* (1 pet only per room) \*\*\*

Red Roof Inn: 707 Colman St, New London, CT 860-444-0001

Rodeway Inn: 211 Parkway North, Waterford 860-442-7227

Econolodge Inn: 251 Greenmanville Ave, Mystic, CT 860-536-9666 \$10 per night for pets

La Quinta: 18 Pratt Rd, Plainfield, CT 860-564-1010; \$25, 2 dog limit

#### **DIRECTIONS TO THE FIELD**

**From New York or New Haven (Best Direction):** I-95 North to I-395 (toward Norwich/Plainfield). Take new Exit 22 (old Exit 85). At light, go straight across to second light. Take a right onto Rt. 138. Follow Rt. 138 for 4-5 miles and take a right onto Rt. 201 (Glasgo Rd.). Follow to stop sign (2-3 miles) and go across Rt. 165 and continue on Rt. 201 (Glasgo Rd.). Farm will be 1-2 miles down on your right, 'Sterry Kinnie Farm'. Lure Coursing signs will be posted.

**From New York or New Haven (Alternative Direction):** I-95 North to Exit 92. At end of ramp, take a left onto Rt. 2 (Norwich Westerly Rd). Follow to rotary, go 1/2 way around and take a right, continuing on Rt. 2. Follow Rt. 2 and take a right, at a light, onto Rt. 201 (Cossaduck Hill Rd). Follow approximately 8 miles and Farm will be on your left, 'Sterry Kinnie Farm'. Lure Coursing signs will be posted.

**From Boston or Providence:** I-95 South to Exit 92. Follow straight across and continue to light. Take a right onto Rt. 2 (Norwich Westerly Rd). Follow directions above for "From New York or New Haven (Alternative Direction)".

**From I-395 Northbound:** Follow directions above for "From New York or New Haven (Best Direction)".

**From I-395 Southbound:** I-395 South to new Exit 22 (old Exit 85). At light, take a left onto Rt. 138. Follow directions above for "From New York or New Haven (Best Direction)". "From New York or New Haven (Best Direction)".

# Lunch and breakfast for sale on site by: K'S KART TOO

|                                                                                                                              |                                                                                                        | g to work a job or want to learn a job<br>he Field Trial Secretary.                                                                       | o, please fill out the form |
|------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|
| 1. I will work on                                                                                                            | :Sa                                                                                                    | iturday Sunday                                                                                                                            |                             |
| I will apprent                                                                                                               | i <b>ce</b> on: Sa                                                                                     | iturday Sunday                                                                                                                            |                             |
| Name:                                                                                                                        |                                                                                                        |                                                                                                                                           |                             |
| Phone:                                                                                                                       |                                                                                                        |                                                                                                                                           |                             |
| Email:                                                                                                                       |                                                                                                        |                                                                                                                                           |                             |
| 2. I am running                                                                                                              | these breeds on <b>Sa</b>                                                                              | turday:                                                                                                                                   |                             |
|                                                                                                                              |                                                                                                        |                                                                                                                                           |                             |
| I am running                                                                                                                 | , these breeds on <b>Sι</b>                                                                            | nday:                                                                                                                                     |                             |
| <ol> <li>Place a check<br/>trial. If you are wi</li> </ol>                                                                   | a next to the jobs you<br>Iling to <b>apprentice</b> , o                                               | <b>nday</b> :<br>have <b>experience</b> with and are willir<br>heck jobs you would like to learn. Y<br>ill get one-on-one attention.      | ng to do on the day of t    |
| <ol> <li>Place a check<br/>trial. If you are wi</li> </ol>                                                                   | a next to the jobs you<br>Iling to <b>apprentice</b> , o                                               | have <b>experience</b> with and are willin<br>theck jobs you would like to learn. Y<br>ill get one-on-one attention.                      | ng to do on the day of t    |
| <ol> <li>Place a check<br/>trial. If you are wi</li> </ol>                                                                   | next to the jobs you<br>lling to <b>apprentice</b> , o<br>vs the job, and you w                        | have <b>experience</b> with and are willin<br>theck jobs you would like to learn. Y<br>ill get one-on-one attention.                      | ng to do on the day of t    |
| 3. Place a check<br>trial. If you are wi<br>person who know                                                                  | next to the jobs you<br>lling to <b>apprentice</b> , o<br>vs the job, and you w                        | have <b>experience</b> with and are willin<br>theck jobs you would like to learn. Y<br>ill get one-on-one attention.                      | ng to do on the day of t    |
| 3. Place a check<br>trial. If you are wi<br>person who know<br>Lure OP                                                       | next to the jobs you<br>lling to <b>apprentice</b> , o<br>vs the job, and you w                        | have <b>experience</b> with and are willin<br>theck jobs you would like to learn. Y<br>ill get one-on-one attention.<br><b>APPRENTICE</b> | ng to do on the day of t    |
| 3. Place a check<br>trial. If you are wi<br>person who know<br>Lure OP<br>Hunt master                                        | inext to the jobs you<br>lling to <b>apprentice</b> , o<br>s the job, and you w<br><b>EXPERIENCED</b>  | have <b>experience</b> with and are willin<br>sheck jobs you would like to learn. Y<br>ill get one-on-one attention.<br><b>APPRENTICE</b> | ng to do on the day of t    |
| 3. Place a check<br>trial. If you are wi<br>person who know<br>Lure OP<br>Hunt master<br>Roll Call                           | inext to the jobs you<br>lling to <b>apprentice</b> , o<br>s the job, and you w<br><b>EXPERIENCED</b>  | have experience with and are willin<br>sheck jobs you would like to learn. Y<br>ill get one-on-one attention.<br>APPRENTICE               | ng to do on the day of t    |
| 3. Place a check<br>trial. If you are wi<br>person who know<br>Lure OP<br>Hunt master<br>Roll Call<br>Paddock                | inext to the jobs you<br>lling to <b>apprentice</b> , o<br>s the job, and you w<br><b>EXPERIENCED</b>  | have experience with and are willin<br>theck jobs you would like to learn. Y<br>ill get one-on-one attention.<br>APPRENTICE               | ng to do on the day of t    |
| 3. Place a check<br>trial. If you are wi<br>person who know<br>Lure OP<br>Hunt master<br>Roll Call<br>Paddock<br>Field Clerk | inext to the jobs you<br>lling to <b>apprentice</b> , o<br>vs the job, and you w<br><b>EXPERIENCED</b> | have experience with and are willin<br>sheck jobs you would like to learn. Y<br>ill get one-on-one attention.<br>APPRENTICE               | ng to do on the day of t    |

Everyone will appreciate your efforts, and the trial will run more smoothly

|                                                                             |                                                  | GONE<br>Saturday, October 19, 2024                                                                                                                    |                                                  |                                |                    |
|-----------------------------------------------------------------------------|--------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|--------------------------------|--------------------|
|                                                                             | Early entry fees: \$<br>[<br>Make checks p       | hursday, October 17, 2<br><b>24 (first entry), \$20 (a</b><br>Day of trial entry fee: \$2<br>ayable (in US funds) to<br>$t_i$ , FTS; 51 Birch Hill Ro | <b>dditional entries</b><br>7<br>GONE and mail t | )<br>D:                        |                    |
|                                                                             | e Field Secretary canr<br>ur completed entry car |                                                                                                                                                       | igned, incomplete, c                             | r unpaid entries; please check | Fee F              |
| Breed:                                                                      | Call Na                                          | ame:                                                                                                                                                  |                                                  |                                | Bre                |
| Registered Name of Hour                                                     | l                                                |                                                                                                                                                       |                                                  |                                | Reg                |
| Stake:  Open  FCF                                                           | I □ Veteran □ Sing                               | le 🗆 Provisional                                                                                                                                      | Additional                                       | Stakes<br>I □ Breeder □ Bench  | Stal               |
| Registration Number:<br>(please write in registering<br>body before number) | J                                                |                                                                                                                                                       |                                                  |                                | Reg<br>(ple<br>bod |
| ☐ If possible, please separate my hounds                                    | Date of Birth:                                   |                                                                                                                                                       | Sex:                                             | □ Bitch                        | □<br>sep           |
| Name of actual owner(s):                                                    |                                                  |                                                                                                                                                       |                                                  |                                | Nar                |
| Address:                                                                    |                                                  |                                                                                                                                                       | Phone:                                           |                                | Add                |
| City:                                                                       |                                                  |                                                                                                                                                       | State:                                           | Zip:                           | City               |
| E-mail (Optional)                                                           |                                                  |                                                                                                                                                       | (Optional)                                       | Region of Residence:           | E-m                |
| Emergency Contact Name                                                      | e and Phone (Optional                            | )                                                                                                                                                     |                                                  |                                | Eme                |
|                                                                             |                                                  | nis hound. Attach a Hou                                                                                                                               | nd Certification or                              | waiver if entered in Open,     |                    |
| Veterans, Provisio                                                          |                                                  | y of the official Registrat                                                                                                                           | ion of this hound r                              | nust accompany this            |                    |
|                                                                             | ation has changed sind                           | ce the last ASFA trial entry                                                                                                                          | . Regarding                                      |                                |                    |
| Check if this hound<br>"clean" trial requirer                               |                                                  | ithin the last 6 trials entere                                                                                                                        | ed. Must be marked                               | in order to qualify for a      |                    |

OFFICIAL AMERICAN SIGHTHOUND FIFLD ASSOCIATION ENTRY FORM

I CERTIFY that I am the actual owner of this 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 and the opportunity to have this dog judged and to win prize money, ribbons, or trophies, I (we) agree to abide by the rules and regulations of the American Sighthound Field Association in effect at the time of this lure field trial, and by any additional rules and regulations appearing in the premium list for this lure field trial. I (we) agree that the club holding this lure field trial has the right to refuse this entry for cause, which the club shall deem to be sufficient. I (we) agree to hold this club, its members, directors, governors, officers, agents or other functionaries, any employees of the aforementioned parties and the owner(s) of the trial premises or grounds 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 upon the lure field trial 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 from any claim loss of this dog by disappearance, theft damage or injury be caused or alleged to be caused by the negligence of the club or any of the aforementioned parties or other dogs. This entry is submitted for acceptance of the forgoing representations and agreements.

SIGNATURE of owner or his agent duly authorized to make this entry \_\_\_\_\_

#### EF-A ~ rev 03-23©

#### OFFICIAL AMERICAN SIGHTHOUND FIELD ASSOCIATION ENTRY FORM GONE

Sunday, October 20, 2024

Early entries close 6 pm, Thursday, October 17, 2024 at the FTS'sresidence. Early entry fees: **\$24 (first entry), \$20 (additional entries)** Day of trial entry fee: **\$27** Make checks payable (in US funds) to GONE and mail to:

Stephanie Pumphrey, FTS; 51 Birch Hill Road; Stow, MA 01775

Fee Paid

The Field Secretary cannot accept conditional, unsigned, incomplete, or unpaid entries; please check your completed entry carefully.

| Breed:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                           | Call Name:   |                                     |                                 |        |      |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|--------------|-------------------------------------|---------------------------------|--------|------|--|
| Registe                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | ered Name of Houn                                                                                                                         | d:           |                                     |                                 |        |      |  |
| Stake:       Open       FCH       Veteran       Single       Provisional       Additional Stakes         Image: Comparison of the state of th |                                                                                                                                           |              |                                     |                                 |        |      |  |
| (please                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | ration Number:<br>write in registering<br>efore number)                                                                                   |              |                                     |                                 |        |      |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | oossible, please<br>te my hounds                                                                                                          | Date of Birt | h:                                  | Sex:                            |        |      |  |
| Name o                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | of actual owner(s):                                                                                                                       |              |                                     |                                 |        |      |  |
| Addres                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | S:                                                                                                                                        |              |                                     | F                               | hone:  |      |  |
| City:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                           |              |                                     | S                               | State: | Zip: |  |
| E-mail                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | (Optional)                                                                                                                                |              |                                     | (Optional) Region of Residence: |        |      |  |
| Emerge                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Emergency Contact Name and Phone (Optional)                                                                                               |              |                                     |                                 |        |      |  |
| V                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | □ Check if this is the first ASFA trial for this hound. Attach a Hound Certification or waiver if entered in Open, Veterans, Provisional. |              |                                     |                                 |        |      |  |
| е                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | □ Check if this is a first-time entry, a copy of the official Registration of this hound must accompany this entry unless NGA.            |              |                                     |                                 |        |      |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                           |              | nged since the last ASFA trial entr |                                 |        |      |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                           |              |                                     |                                 |        |      |  |

I CERTIFY that I am the actual owner of this 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 and the opportunity to have this dog judged and to win prize money, ribbons, or trophies, I (we) agree to abide by the rules and regulations of the American Sighthound Field Association in effect at the time of this lure field trial, and by any additional rules and regulations appearing in the premium list for this lure field trial. I (we) agree that the club holding this lure field trial has the right to refuse this entry for cause, which the club shall deem to be sufficient. I (we) agree to hold this club, its members, directors, governors, officers, agents or other functionaries, any employees of the aforementioned parties and the owner(s) of the trial premises or grounds 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 upon the lure field trial 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 from any claim loss of this dog by disappearance, theff damage or injury be caused or alleged to be caused by the negligence of the club or any of the aforementioned parties or other dogs. This entry is submitted for acceptance of the forgoing representations and agreements.

SIGNATURE of owner or his agent duly authorized to make this entry

#### OFFICIAL AMERICAN SIGHTHOUND FIELD ASSOCIATION LCI ENTRY FORM GONE Saturday, October 19, 2024

Early entries close 6 pm, Thursday, October 17, 2024 at the FTS's residence. Early entry fees: **\$24 (first entry), \$20 (additional entries)** Day of trial entry fee: **\$27** Make checks payable (in US funds) to GONE and mail to: Stephanie Pumphrey, FTS; 51 Birch Hill Road; Stow, MA 01775

# Fee Paid \_\_\_\_\_ The Field Secretary cannot accept conditional, unsigned, incomplete or unpaid entries; please check your completed entry carefully.

| Breed:            |                                                                                 | Call Name:                 |                                                   |                |                    |
|-------------------|---------------------------------------------------------------------------------|----------------------------|---------------------------------------------------|----------------|--------------------|
| Register          | ed Name of dog:                                                                 | I                          |                                                   |                |                    |
| Stake:            | □ <b>LCI-</b> Small<br>□ Open                                                   | □ LCI-Large<br>□ Excellent | □ LCI-Sighthound<br>□ Veteran                     | Mix            |                    |
|                   | Registrat                                                                       | ion Number: (please        | e write in registering bo                         | ody before num | nber)              |
| Date of<br>Birth: |                                                                                 |                            |                                                   | Sex:           | g 🗆 Bitch          |
| Name of           | actual owner(s):                                                                |                            |                                                   |                |                    |
| Address           |                                                                                 |                            |                                                   | Phone:         |                    |
| City:             |                                                                                 |                            |                                                   | State:         | Zip:               |
| E-mail            |                                                                                 |                            |                                                   | (Optional) Reg | gion of Residence: |
| Emerger           | ncy Contact Name a                                                              | nd Phone (Optional)        |                                                   |                |                    |
|                   |                                                                                 |                            | of the official Registra<br>ation form, PAL regis |                |                    |
| □ Ch              | Check if any information has changed since the last ASFA trial entry. Regarding |                            |                                                   |                |                    |

I CERTIFY that I am the actual owner of this 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 and the opportunity to have this dog judged and to win prize money, ribbons, or trophies, I (we) agree to abide by the rules and regulations of the American Sighthound Field Association in effect at the time of this lure field trial, and by any additional rules and regulations appearing in the premium list for this lure field trial. I (we) agree that the club holding this lure field trial has the right to refuse this entry for cause, which the club shall deem to be sufficient. I (we) agree to hold this club, its members, directors, governors, officers, agents or other functionaries, any employees of the aforementioned parties and the owner(s) of the trial premises or grounds 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 upon the lure field trial 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 loss of the club or any of the aforementioned parties or by the negligence of any person or any other cause or causes. I (we) certify and represent that the dog entered is not a hazard to person or other dogs. This entry is submitted for acceptance of the forgoing representations and agreements.

**SIGNATURE** of owner or his agent duly authorized to make this entry \_\_\_\_\_

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Please separate the entries before submitting to FTS.

#### OFFICIAL AMERICAN SIGHTHOUND FIELD ASSOCIATION LCI ENTRY FORM GONE

Sunday, October 20, 2024

Early entries close 6 pm, Thursday, October 17, 2024 at the FTS's residence. Early entry fees: **\$24 (first entry), \$20 (additional entries)** Day of trial entry fee: **\$27** Make checks payable (in US funds) to GONE and mail to: Stephanie Pumphrey, FTS; 51 Birch Hill Road; Stow, MA 01775

Fee Paid \_\_\_\_\_ The Field Secretary cannot accept conditional, unsigned, incomplete or unpaid entries; please check your completed entry carefully.

| Breed: Call Name                                                                                                                                                                          |                                             |                         |                               |                   |                 |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|-------------------------|-------------------------------|-------------------|-----------------|--|
| Registere                                                                                                                                                                                 | ed Name of dog:                             |                         |                               |                   |                 |  |
| Stake:                                                                                                                                                                                    | □ <b>LCI</b> -Small<br>□ Open               | □ LCI-Large □ Excellent | □ LCI-Sighthound<br>□ Veteran | Mix               |                 |  |
|                                                                                                                                                                                           | Registrat                                   | tion Number: (pleas     | se write in registering bo    | ody before numbe  | ər)             |  |
| Date of<br>Birth:                                                                                                                                                                         |                                             |                         |                               | Sex:              | □ Bitch         |  |
| Name of                                                                                                                                                                                   | actual owner(s):                            |                         |                               |                   |                 |  |
| Address:                                                                                                                                                                                  |                                             |                         |                               | Phone:            |                 |  |
| City:                                                                                                                                                                                     |                                             |                         |                               | State:            | Zip:            |  |
| E-mail                                                                                                                                                                                    |                                             |                         |                               | (Optional) Regior | n of Residence: |  |
| Emergen                                                                                                                                                                                   | Emergency Contact Name and Phone (Optional) |                         |                               |                   |                 |  |
| □ Check if this is a first-time entry, a copy of the official Registration of this hound must accompany this entry. (i.e., AKC Registration form, PAL registration, Canine Partner, etc.) |                                             |                         |                               |                   |                 |  |
| Check if any information has changed since the last ASFA trial entry. Regarding                                                                                                           |                                             |                         |                               |                   |                 |  |

I CERTIFY that I am the actual owner of this 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 and the opportunity to have this dog judged and to win prize money, ribbons, or trophies, I (we) agree to abide by the rules and regulations of the American Sighthound Field Association in effect at the time of this lure field trial, and by any additional rules and regulations appearing in the premium list for this lure field trial. I (we) agree that the club holding this lure field trial has the right to refuse this entry for cause, which the club shall deem to be sufficient. I (we) agree to hold this club, its members, directors, governors, officers, agents or other functionaries, any employees of the aforementioned parties and the owner(s) of the trial premises or grounds 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 upon the lure field trial 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 loss of this dog by disappearance, theft damage or injury be caused or alleged to be caused by the negligence of the club or any of the aforementioned parties or by the negligence of any person or any other cause or causes. I (we) certify and represent that the dog entered is not a hazard to person or other dogs. This entry is submitted for acceptance of the forgoing representations and agreements.

**SIGNATURE** of owner or his agent duly authorized to make this entry

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Please separate the entries before submitting to FTS.

## **OFFICIAL AMERICAN SIGHTHOUND FIELD ASSOCIATION Request for ASFA Lure Chasing Instinct Registration Number**

Fee Paid \_\_\_\_\_ This form is for dogs without any registration number from another registering body. Please print legibly.

| Breed:                                                  | Call Name:                 |                  |                                       |
|---------------------------------------------------------|----------------------------|------------------|---------------------------------------|
| Registered Name of Dog:                                 |                            |                  |                                       |
| FTS will circle Size after w                            | icketing at Inspection:    |                  |                                       |
| Size Small: up to 17 <sup>1</sup> / <sub>2</sub> inches | (or brachycephalic)        | Size Large: over | 17 <sup>1</sup> / <sub>2</sub> inches |
| Registration Num                                        | ber: (To be assigned by AS | FA records coord | dinator.)                             |
| Date of                                                 | Sex:                       |                  |                                       |
| Birth:                                                  |                            | og 🗆 Bitch       |                                       |
| Name of actual owner(s):                                |                            |                  |                                       |
| Address:                                                |                            | Phone:           |                                       |
| City:                                                   |                            | State:           | Zip:                                  |
| E-mail                                                  |                            | Region of Res    | sidence: (Optional)                   |
| Emergency Contact Name and Phone                        |                            |                  |                                       |

This top portion is to be submitted with the \$10 fee to the Field Trial Secretary. First time trial entry on separate form.

\* \* \* \* \* \* \* \* \* \* \* \* \* \* \*

| (Dog's Name)       |        | was entered in the | (ASFA Club Name)              |
|--------------------|--------|--------------------|-------------------------------|
| ASFA trial held on | (D-4-) | The dog was        | wicketed at inspection and is |
| registered as Size | (Date) | The fee of \$10    | was received by the FTS and   |

submitted to the ASFA Records Coordinator.

Printed name of Field Trial Secretary

Signature of Field Trial Secretary

(Owner is to retain this receipt as proof of registration until notified by the ASFA.)

#### AMERICAN SIGHTHOUND FIELD ASSOCIATION HOUND CERTIFICATION

| stake, a hound must have been ce<br>date for the entry or have previous<br>applies to a hound entered in the                                                                             | <b>Ch. V, Sec. 4 (a) OPEN STAKE:</b> To be eligible to enter the open ertified by a licensed judge within the year preceding the closing sly competed in the Open Stake. This eligibility requirement also a Veteran Stake, which has not competed in Open previously. Is form and attach it to the entry form for the hound's first entry, |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Registered Name of Hound:                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                             |
|                                                                                                                                                                                          | Breed:                                                                                                                                                                                                                                                                                                                                      |
| Registered Owner's Name:                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                             |
| a similar running style). During tinterfere with the other hound. I fur                                                                                                                  | , the above named hound completed a lure<br>ng with another hound of the same breed (or another breed with<br>the course the above named hound showed no inclination to<br>ther certify that I am a licensed judge for the ASFA.                                                                                                            |
| Name of Licensed Judge:                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                             |
| Signature:                                                                                                                                                                               | Date:                                                                                                                                                                                                                                                                                                                                       |
| I hereby certify that the hound run<br>that information provided on this for                                                                                                             | ning in the certification course is the hound identified above and<br>orm is true and correct.                                                                                                                                                                                                                                              |
| Signature:                                                                                                                                                                               | Date:                                                                                                                                                                                                                                                                                                                                       |
| entered in open, or veteran (as a first time end<br>coordinator and shall forfeit any points and pla                                                                                     | entry form the first time this hound is entered in an open or veteran stake. Any hound tered hound), which has not been certified, shall be declared ineligible by the records accments awarded.                                                                                                                                            |
| PLEASE                                                                                                                                                                                   | RETAIN A COPY FOR YOUR RECORDS.                                                                                                                                                                                                                                                                                                             |
| Waiver of Requirement: This re<br>coursing title from another recogniz<br>for such title has been approved b<br>qualifies for a waiver, complete th<br>waivers must accompany this certi |                                                                                                                                                                                                                                                                                                                                             |
| Registered Name of Hound:                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                             |
| Registration Number:                                                                                                                                                                     | Breed:                                                                                                                                                                                                                                                                                                                                      |
| Registered Owner's Name:                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                             |
| <u>CKC</u> : FCH FCHX                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                             |
| <u>AKC</u> : QC SC FC                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                             |
| Hound Certification previously sub                                                                                                                                                       | mitted.                                                                                                                                                                                                                                                                                                                                     |
| I hereby certify that the hound ident<br>above (or that the required Certifica<br>on this form is true and correct.                                                                      | tified above has completed the requirements for the title indicated ation was previously submitted) and that the information provided                                                                                                                                                                                                       |
| Signature:                                                                                                                                                                               | Date:Date:                                                                                                                                                                                                                                                                                                                                  |
| Owner or Autho                                                                                                                                                                           | orized Agent of Hound                                                                                                                                                                                                                                                                                                                       |
| Sec-06 rev 01/21 ©                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                             |

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