

**FIRST CLASS • DATED MATERIAL**

**PREMIUM LIST**

**Terri Jones, 1037 Grand St, Phillipsburg, NJ 08865**  
**Telephone: (732) 261-3587**  
**SnoopyRockyMom@gmail.com**

*EARLY ENTRIES CLOSE Thursday, August 19, 2021 at 5:00PM EDT  
at the FTS address, 1037 Grand St., Phillipsburg, NJ 08865  
DAY OF TRIAL ENTRIES CLOSE 7:45 AM at the FTS's Table*

**Motels and Camping**

**Host Hotel:** Holiday Inn At Roberts Centre  
123 Gano Rd, Wilmington, OH 45177, 937-283-3200. See [www.igcans.com](http://www.igcans.com) for details.

**Other Hotels:**

Red Roof Inn, 937-426-6116, Fairborn, I-675 & Fairfield Road.  
Red Roof Inn, 937-325-5356, 155 W. Leffel, Springfield, I-70 & Rt 72.  
Red Roof Inn, 937-898-1054, Miller Lane, Dayton, I-75 exit 59 first exit South of I-70.  
Red Roof Inn, 937-866-0705, 222 Byers Rd., Dayton, I-75 & Rt 725 West.  
Camping is allowed and free. Limited electric hookups. If the gate to the Park is locked, call 937-561-1747.

**Veterinarian**

Dayton Med-Vet Emergency Veterinary Clinic 2714 Springboro Rd W Dayton, OH 45439 937-293-2714  
From the Park, left (West) on Fairfield-Yellow—Springs Road, left at the traffic light (Route 235), I-675 South to I-35 West to I-75 South, exit 50A, Dryden Road, go under I-75 then left at first road (traffic light), Clinic is on the left.

**ASFA Certs will be held after the trial and are free of charge.**  
**There will be no practices on Monday.**

**Notes:**

- Please bring your own food and water.
- Fast food places are within a few miles.
- A \$5.00 fine will be collected from the handler of any non-competing hound running loose on the field during the course in progress, and from any person not cleaning up after his/her hound.
- The Greene County Park rules do NOT allow alcoholic beverages on the Park grounds.
- Singles limited to 5 Italian Greyhounds



**Region 6**

**ASFA TRIAL**

**ITALIAN GREYHOUNDS ONLY**

**Monday, August 30, 2021**

Twin Towers Park, approximately 30 miles from the Host Hotel  
640 W Yellow Springs Fairfield Rd  
Yellow Springs OH 45387

**Early Entry Fees - \$20 per dog;**  
**Day of Entry Fees - \$25**

*Permission has been granted by the American Sighthound Field Association  
for the holding of this event under ASFA Rules and Regulations.  
Audrey Silverstein, Chairperson, ASFA Scheduling Committee*

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Go to [www.ASFA.org](http://www.ASFA.org)  
for online Rulebook, Policies, Contacts, Clubs,  
Trial Schedules, Trial Results & much more.

### IGCA Officers

President .....Lynne Ezzell                      1<sup>st</sup> Vice President ..... Justin Flossi  
 Board Secretary..... Nancy Jo Anderson      2<sup>nd</sup> Vice President..... Jennifer Graves  
 Corresponding Secretary.....Stelios Viennas      reasurer ..... Marsha Pugh  
 Board of Directors:..... Mark Lucas, Mary Marlowe, Chelsea James, Dalena Franklin

### COURSE PLANS Monday – Total 600 yards

### JUDGE & ASSIGNMENTS

All Italian Greyhounds will be judged by Holly Hamilton, Cincinnati, OH

### FIELD COMMITTEE

Field Trial Chairman	<b>Barbara Steinlage, 732 lone Ave NE, Spring Lake Park, MN 55432</b>
Field Trial Secretary	<b>Terri Jones, 1037 Grand St, Phillipsburg, NJ 08865, SnoopyRockyMom@gmail.com</b>
Lure Operator	<b>Eddie Kominek</b>
Field Clerks	<b>John Jones, Barb Steinlage</b>
Huntmasters	<b>Lynn Partridge, Sarah Evans</b>
Inspection	<b>Lynn Partridge, Sarah Evans</b>

TRIAL HOURS 8:00AM UNTIL AFTER RIBBONS ARE AWARDED.

**Day of Trial entries close at 7:45 AM**

**Substitutions (same owner) until August 19 at 5:00 PM**

**ROLL CALL: Promptly at 8:00 AM for trial entries.**

**(Earlier for Field Committee, if available, or if pre-entered in trial)**

**Singles limited to 5 entries.**

ENTRIES WILL NOT BE ACKNOWLEDGED BY RETURN MAIL OR PHONE.

ENTRIES MAY BE ACKNOWLEDGED BY E-MAIL IF REQUESTED.

**Ribbons or rosettes will be offered for all placements.**

**First=Blue, Second=Red, Third=Yellow, Fourth=White, NBQ=Green**

**Highest Scoring Single=Navy/Gold, Best of Breed=Purple/Gold,**

### ELIGIBLE BREEDS & REGISTRY

Only purebred Italian Greyhounds are eligible to enter. .

All entries shall be individually registered with the AKC (ILP/PAL included), the UKC. A photocopy of acceptable registry must be submitted with each hound's first ASFA field trial entry.

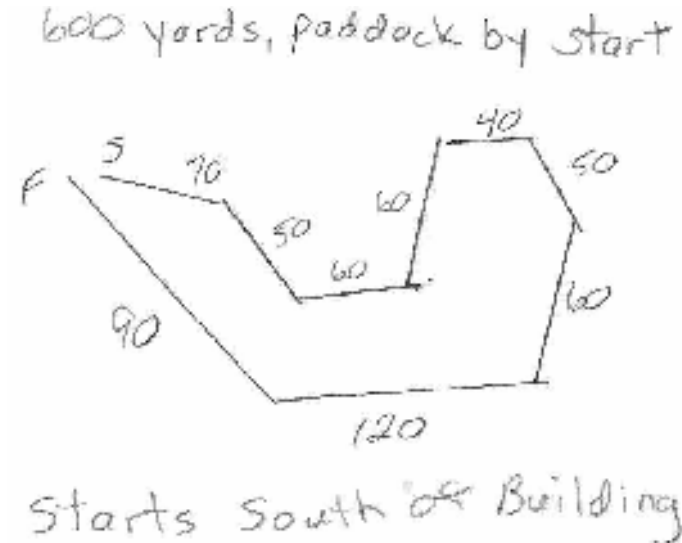
### REGULAR STAKES OFFERED

**OPEN STAKE:** Any eligible Italian Greyhound who has met the certification requirements. ASFA Field Champions of record are excluded.

**FIELD CHAMPION STAKE:** Any ASFA Field Champion

**VETERAN STAKE:** Any eligible Italian Greyhound who has met the certification requirements and whose age is at least six years. Points go toward V-FCh or V-LCM titles.

**SINGLE STAKE:** Any eligible Italian Greyhound including those disqualified to run in other stakes. Each hound runs alone. Not eligible for Best of Breed. Hounds are eligible to earn TCP and CPX titles from the Singles stake.



### Emergency Phone contacts at the Field

**Barb Steinlage, FTC .....612-599-9914**  
**Terri Jones, FTS..... 732-261-3587**

OFFICIAL AMERICAN SIGHTHOUND FIELD ASSOCIATION ENTRY FORM

*Italian Greyhound Club of America*

**Monday, August 30, 2021**

Early entries close August 19, 2021 at 5PM at the FTS's residence.

Early entry fees: **\$20 per dog**; Day of trial entry fee: **\$25 each dog**

(Substitutions, same owner, until Aug 19, 2021 at 5PM

Make checks payable (in US funds) to IGCA and mail to:

**Terri Jones – FTS • 1037 Grand St, Phillipsburg, NJ 08865**

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

Breed: <b>IG</b>	Call Name:	
Registered Name of Hound:		
Stake: <input type="checkbox"/> Open <input type="checkbox"/> FCH <input type="checkbox"/> Veteran <input type="checkbox"/> Single	Additional Stakes <input type="checkbox"/> Kennel <input type="checkbox"/> Breeder <input type="checkbox"/> Bench	
<b>Registration Number:</b> (please write in registering body before number)		
<input type="checkbox"/> If possible, please separate my hounds	Date of Birth:	Sex: <input type="checkbox"/> Dog <input type="checkbox"/> Bitch
Name of actual owner(s):		
Address:		Phone:
City:	State:	Zip:
E-mail (Optional)	(Optional) Region of Residence:	
Emergency Contact Name and Phone (Optional)		
<input type="checkbox"/> Check if this is the first ASFA trial for this hound. Attach a Hound Certification or waiver if entered in Open, Veterans, Limited. <input type="checkbox"/> Check if this is a first-time entry, a copy of the official Registration of this hound must accompany this entry unless NGA. <input type="checkbox"/> Check if any information has changed since the last ASFA trial entry. Regarding _____ <input type="checkbox"/> Check if this hound has been dismissed within the last 6 trials entered. Must be marked in order to qualify for a "clean" trial requirement.		

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 \_\_\_\_\_

Please separate the entries before submitting to FTS.

OFFICIAL AMERICAN SIGHTHOUND FIELD ASSOCIATION ENTRY FORM

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

Breed: <b>IG</b>	Call Name:	
Registered Name of Hound:		
Stake: <input type="checkbox"/> Open <input type="checkbox"/> FCH <input type="checkbox"/> Veteran <input type="checkbox"/> Single	Additional Stakes <input type="checkbox"/> Kennel <input type="checkbox"/> Breeder <input type="checkbox"/> Bench	
<b>Registration Number:</b> (please write in registering body before number)		
<input type="checkbox"/> If possible, please separate my hounds	Date of Birth:	Sex: <input type="checkbox"/> Dog <input type="checkbox"/> Bitch
Name of actual owner(s):		
Address:		Phone:
City:	State:	Zip:
E-mail (Optional)	(Optional) Region of Residence:	
Emergency Contact Name and Phone (Optional)		
<input type="checkbox"/> Check if this is the first ASFA trial for this hound. Attach a Hound Certification or waiver if entered in Open, Veterans, Limited. <input type="checkbox"/> Check if this is a first-time entry, a copy of the official Registration of this hound must accompany this entry unless NGA. <input type="checkbox"/> Check if any information has changed since the last ASFA trial entry. Regarding _____ <input type="checkbox"/> Check if this hound has been dismissed within the last 6 trials entered. Must be marked in order to qualify for a "clean" trial requirement.		

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

Please separate the entries before submitting to FTS.

**AMERICAN SIGHTHOUND FIELD ASSOCIATION  
HOUND CERTIFICATION**

**Rule effective October 1, 1994: Ch. V, Sec. 4 (a) OPEN STAKE:** *To be eligible to enter the open stake, a hound must have been certified by a licensed judge within the year preceding the closing date for the entry or have previously competed in the Open Stake. This eligibility requirement also applies to a hound entered in the Limited or Veteran Stake, which has not competed in Open previously. Please complete this portion of this form and attach it to the entry form for the hound's first entry, including an entry for a Fun Trial.*

Registered Name of Hound: \_\_\_\_\_

Registration Number: \_\_\_\_\_ Breed: \_\_\_\_\_

Registered Owner's Name: \_\_\_\_\_

I hereby certify that on (date) \_\_\_\_\_, the above named hound completed a lure course of at least 500 yards, running with another hound of the same breed (or another breed with a similar running style). During the course the above named hound showed no inclination to interfere with the other hound. I further certify that I am a licensed judge for the ASFA.

Name of Licensed Judge: \_\_\_\_\_

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

I hereby certify that the hound running in the certification course is the hound identified above and that information provided on this form is true and correct.

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

Owner or Authorized Agent of Hound

This certification form must be attached to the entry form the first time this hound is entered in an open, limited, or veteran stake. Any hound entered in open, limited, or veteran (as a first time entered hound), which has not been certified, shall be declared ineligible by the records coordinator and shall forfeit any points and placements awarded.

**PLEASE RETAIN A COPY FOR YOUR RECORDS.**

**AMERICAN SIGHTHOUND FIELD ASSOCIATION  
HOUND CERTIFICATION WAIVER**

**Waiver of Requirement:** *This requirement will be waived for a hound that has earned a lure coursing or racing title from another recognized organization, if such title requires competition, and if a waiver for such title has been approved by the ASFA, or a CKC Hound Certification Form. If your hound qualifies for a waiver, complete this portion of this form and attach it to your entry form. Proof of waivers must accompany this certification form.*

Registered Name of Hound: \_\_\_\_\_

Registration Number: \_\_\_\_\_ Breed: \_\_\_\_\_

Registered Owner's Name: \_\_\_\_\_

**CKC:** FCH FCHX

**AKC:** QC SC FC

Hound Certification previously submitted.

I hereby certify that the hound identified above has completed the requirements for the title indicated above (or that the required Certification was previously submitted) and that the information provided on this form is true and correct.

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

Owner or Authorized Agent of Hound

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Registration Number: \_\_\_\_\_ Breed: \_\_\_\_\_

Registered Owner's Name: \_\_\_\_\_

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

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Registration Number: \_\_\_\_\_ Breed: \_\_\_\_\_

Registered Owner's Name: \_\_\_\_\_

**CKC:** FCH FCHX

**AKC:** QC SC FC

Hound Certification previously submitted.

I hereby certify that the hound identified above has completed the requirements for the title indicated above (or that the required Certification was previously submitted) and that the information provided on this form is true and correct.

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

Owner or Authorized Agent of Hound

ASFA COURSING COVID-19 EVENT WAIVER I fully attest to the best of my knowledge that I do not have COVID-19 at the time of attending this event. I also attest that I have NOT been in contact with or exposed to any known carrier of COVID-19 within the past 14 days. I agree that I am attending this ASFA event entirely at my own risk and take full responsibility for my own health and safety during this event. I will follow all ASFA and host club rules and requirements to reduce any exposure and possibility of contracting or spreading the virus. I will also fully cooperate with any city, county or state guidelines that have jurisdiction in the area in which the event is taking place. I fully submit that the American Sighthound Field Association (ASFA), host club, the venue that I am attending, and any workers or volunteers, are in no way liable for any present or future COVID-19 exposure incurred at any time by any person, in attendance or not in attendance, during or after this event.

PRINT NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

EMAIL: \_\_\_\_\_

DATE: \_\_\_\_\_

ALL FIELDS MUST BE FILLED OUT TO COMPLETE ENTRY.

PLEASE BRING THIS WAIVER WITH YOU TO THE EVENT. DO NOT SEND WITH YOUR PRE-ENTRY.

#### COVID-19 Lure Coursing Procedures

We will follow State and local guidelines.

1. All Field Committee will wear facial coverings if they have not been fully vaccinated.
2. All participants will wear facial coverings if not fully vaccinated.
3. We ask that you park at a safe distance away from each other.
4. We will have instant hand sanitizer and/ or wet wipes available.
5. Practice social distancing the best you can.
6. No self-serve ribbons anymore due to cross contamination.