

**K9 Sports Centre**  
**SDDA Sanctioned Games Scent Trial #574**  
**Entry Form**

**Email Entry & Waiver** (print, scan/photo, attach to an email): [rvrspellcardi@gmail.com](mailto:rvrspellcardi@gmail.com)  
**Payment** via email money transfer to [k9sportscentre@gmail.com](mailto:k9sportscentre@gmail.com) **PASSWORD: games**

Trial Date	28 February 2021
Trial Location	396 Flora Street, Carleton Place, Ontario
Organization	K9 Sports Centre

**DOG INFORMATION**

Name		Call Name	
Breed		SDDA #	
Sex		Date of Birth	

**OWNER/HANDLER INFORMATION**

Name			
Address (street)			
City		Province	
Postal Code/ZIP		email	
Cel phone		SDDA # (optional)	

**Class Entered**

Distance                       Speed                       Aerial: Fly                       High Fly

Team                       Other Team Member: \_\_\_\_\_.

**Entry Fees:**    Distance, Speed, Aerial: \$30    Team: \$15 (each member)    FEO (full price)

Total Enclosed/Sent: \_\_\_\_\_.

Payment via email money transfer to [k9sportscentre@gmail.com](mailto:k9sportscentre@gmail.com) **PASSWORD: games**

Will your dog be eligible for an award at this trial? If so, what? (Title(s), Champion)

## WAIVER

I CERTIFY that I am the owner or authorized agent of the owner of the dog entered in this SDDA sanctioned Sporting Detection Trial. I accept full responsibility for all statements made in this entry and for the dog's participation in this trial. In consideration of the acceptance of this entry I agree to be bound by the rules and regulations of the Sporting Detection Dogs Association and any additional rules and regulations put forth regarding this specific event. I agree to hold harmless the SDDA, judge, K9 Sport Centre and their agents, volunteers and employees for any loss, damage, or injury sustained by spectators or by exhibitors and handlers or any of their dogs or property. I agree to assume sole responsibility and agree to indemnify and hold harmless the SDDA, judge, K9 Sport Centre and their agents, volunteers and employees for loss, accidents, or theft and hold the SDDA, judge, K9 Sport Centre and their agents, volunteers and employees harmless for any claims, actions, or lawsuits resulting from my participation in this event.

Name	
Signature	
Date	
Minor's Name (Parent or Guardian Sign and Date Above)	

**COVID 19 WAIVER**  
**(To be handed in at trial)**

I/we certify that I/we do not, to my/our knowledge, have COVID-19 at the time of attending this event. Nor have I/we been in contact with or exposed to any known carrier of COVID-19 within the past 14 days.

I/we have not been tested positive within the last 14 days. If I/we have had the virus, I/we certify that we have had at least two negative tests 14 or more days prior to the Event and have been released by government officials and/or health care providers to resume normal activity without limit.

I/we understand that we have entered and are competing at this scent detection event entirely at my/our own risk and take full responsibility for my/our own health and safety during this Event.

I/we pledge to follow all Sport Scent Detection Association and specific K9 Sport Centre rules and requirements to mitigate any possibility of infecting others or becoming infected.

I/we will also cooperate with any health department and/or Provincial/Local guidelines that have jurisdiction in the area in which the Event is taking place.

The Sport Scent Detection Association and the K9 Sport Centre are in no way liable for any present or future COVID-19 infection incurred at any time by any person, in attendance or not in attendance, during or after this Event.

Name	
Signature	
Date	
Minor's Name (Parent or Guardian Sign and Date Above)	