

No Chicken Ranch Welcomes  
**Dave and Trudy Viklund**  
**September 15th & 16th 2014!**

For 2 days of herding instruction and discussion

Each Day will begin at 8:30 with each participant will be granted a half hour of instruction before lunch and an additional half hour following lunch. Teams will work in small pens or in larger field settings, with either Dave or Trudy. Camping is available on site at no charge but there are no hookups.

Continental breakfast, beverages and snacks are provided. We will have a daily lunch time pot luck for a group discussion so feel free to participate in that.

### Full Clinic Price \$250

1st Dog: \_\_\_\_\_  
\_\_\_\_\_ Second Dog (if you wish to split your spot with another dog)

Handler: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Phone #: \_\_\_\_\_

Entry: \_\_\_\_\_ Number of Days @ \$135.00 Audit \_\_\_\_\_ \$25/day \_\_\_\_\_ Full Clinic \$250.00

Camping: \_\_\_\_\_yes \_\_\_\_\_ No (size of unit - strictly for information)

I agree to all of the terms and conditions of the attached waiver and understand the Injury **OR** Death of sheep caused by my dog *May* result in an additional charge of \$250.00 per sheep. I will not receive the carcass of said sheep. Further, I understand that any abuse of the instructors or facility may result in my immediate removal from the clinic without refund. A non-refundable deposit of \$100 needs to be paid by August 15, 2014 and the remainder of the clinic paid by September 1, 2014. A refund will be granted only if you find another full working spot for yours

Participant: \_\_\_\_\_ Date: \_\_\_\_\_

Make cheques payable to the: **Billie Richardson**

Mail entries to: **Suite: 104 14-900 Village Lane, Okotoks, AB T1S1Z6**

\*Contact Billie Richardson at [billiegirl@platinum.ca](mailto:billiegirl@platinum.ca) for any questions or call 403-975-0744

**No Chicken Ranch Welcomes**  
**HERDING DOG TRAINING LESSONS AND/OR CLINICS**  
**PARTICIPANT RELEASE OF LIABILITY**

\*\*\*\*\***READ THIS DOCUMENT CAREFULLY**\*\*\*\*\*

In consideration for participating in the **No Chicken Ranch, Jerry Kurbatoff, Billie Richardson, Trudy Viklund and Dave Viklund**, the undersigned agrees as follows for the dates of September 15<sup>th</sup> & 16<sup>th</sup>, 2014:

I will keep my dog under my direct control at all times. This means that I will keep my dog restrained on a leash unless we are actively engaged in working livestock under the direction of the trainer.

**I understand that participating in Herding Dog Training Lessons and /or Clinics is inherently dangerous due to the unpredictable nature of both dogs and livestock.** This activity exposes my dog and I to above normal risks of personal injury, and my property to above normal risks of damage.

**I am participating in this Clinic at my own risk.**

I am solely responsible for my own safety and that of my dog. I release No Chicken Ranch, Jerrold Kurbatoff et al, the owners of the property on which the Clinic and/or Ranch Trial takes place, and their agents, managers, employees and volunteers from any and all liability if I or my dog suffer personal injury and/or my property suffers physical damage.

**I will take no legal action against any of the above persons or establishments upon injury to myself or my dog or damage to my property.**

I am solely responsible for any personal injury and/or property damage incurred by others and caused by me or my dog, including injury or death to livestock. The replacement cost of the livestock used for this clinic and the following Ranch and arena trials will be: Sheep \$ 250.00 ea.

**I will promptly reimburse any party that sustains personal injury and/or property damage caused by me or my dog. In addition, I will indemnify and hold harmless No Chicken Ranch, Jerrold Kurbatoff, and/or the owner(s) of the property on which the Clinic and/or Ranch Trials take place, from any cause of action brought by others against them caused by the actions of me or my dog.**

I declare that I am the legal owner of the dog identified below and that my dog is in good health, including being current on rabies, distemper, parvo and parainfluenza immunizations.

**I HAVE READ THIS AGREEMENT BEFORE SIGNING IT**

Signature of Owner/handler: \_\_\_\_\_

(If under 18 years of age, signature of parent or guardian)

Name of Dog's Owner/Handler \_\_\_\_\_

Address: \_\_\_\_\_

Telephone # \_\_\_\_\_ Email: \_\_\_\_\_

Dog's name: \_\_\_\_\_ Breed: \_\_\_\_\_ Sex: \_\_\_\_\_ Age: \_\_\_\_\_