***Hahn Ranch Sheep Trial***

**April 26-27, 2025, 1 TRIAL EACH DAY**

950 Worthington Road  
Eagle Point, OR 97524  
Trial Hosts: Marilyn Hahn and Josette Brault

ENTRIES OPEN FEBRUARY 28 \*\* ENTRIES DUE BY MARCH 31, 2025

**MSSA SANCTIONED – Points & Time Arena Sheep Trial**

**DAY MONEY AND PRIZES AWARDED FOR TWO DAY COMBINED SCORES**

**OPEN, NURSERY, INTERMEDIATE & NOVICE CLASSES**

**ALL ON FOOT**

ENTRY FEE: $55.00/PER DOG/PER TRIAL($50 Entry Fee plus $5 Sanctioning Fee)

Please make checks payable to: Josette Brault

Please mail entries to: Josette Brault 690 Buttercup Lane, Jacksonville, OR 97530

Any questions contact Josette at 707-483-4839

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Dogs Name | MSSA ID | Breed | Age | Class | 4/26/25 | 4/27/25 | Total |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

**O – Open N – Nursery I – Intermediate Nov – Novice**   
 Total Fees: \_\_\_\_\_\_\_\_\_\_\_\_\_

Handlers Name (Please Print):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ MSSA ID \_\_\_\_\_\_\_\_

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State:\_\_\_\_\_\_ Zip:\_\_\_\_\_\_\_\_\_

Contact Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

In consideration that my dog(s) and I will be participating in the Hahn Ranch Sheep Trial, I understand that I am responsible for any cost incurred as a result of damage caused by me, my family or my dogs to facilities, all animals at the Hahn Ranch Sheep Trial equipment or people. I hereby agree that in the event of personal injury, or damage to my property or animals, I will not hold Hahn Ranch, livestock owners, Mountain States Stockdog Association, the Trial Sponsors, stock handlers, helpers or other property owners responsible.

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