DOG'S DAY IN THE PARK SUNDAY, JUNE 19, 2016 - STARTING AT 9: 00AM

Richard Bong Recreation Area (meet at the Gravel Pond) 26313 Burlington Rd, Kansasville, WI 53139

Secretary — Karen Lumb Email: <u>karenlumb@aol.com</u> Phone: 262-523-1130 See the entry application for details.

Certificate Events:

- WD
- WDX

Download entry at: <u>www.wessaonline.org</u> <u>www.facebook.com/</u> groups/wessaonline/

Find out what the WD is all about. The Working Test Requirements and Judging Guidelines can be found on the ESSFTA website.



The picnic will start after the test, at the **Pavilion**. **WESSA will provide burgers, brats, and water.** Bring your own food to grill if you don't care for hamburgers or brats. Please, bring a dish to pass, chairs and whatever you'd like to drink.

Wisconsin English Springer Spaniel Association, Inc.

WESSA WD/WDX & Pot Luck Picnic

June 19, 2016 - 9:00 AM

Bong State Recreational Area (State Park Sticker Is Needed) Kansasville, WI

Mark your calendars now for our annual **WD/WDX Certificate Tests and Pot Luck Picnic**. It's a great time to get together and watch our dogs work.

The WD/WDX is open to all Flushing Spaniels. Our judge will be Dawn Wuerl. Entry fee is \$20.00. Pigeons will be used for the test. Entries close June 10, 2016.

Dog's Day In The Park — WESSA will provide hamburgers, brats and buns for the picnic. You may bring your own food to grill if you don't care for hamburgers or brats. If you plan on staying for the picnic, please bring a dish to pass and provide your own refreshments.

> Secretary, Karen Lumb Contact Info: karenlumb@aol.com Or 262-523-1130

Birds for the Hunt Test Practice will cost \$6.50 each.

Please use the reservation form below.

RESERVATIONS DUE JUNE 10, 2016

I would like to enter

C O AM I Area	Flushing Spar Open to ALL Flushin WORKING DOG Date: June 19, 2016 Ti AM Location: Bong St Recreational Area—Kansasvi	g Spaniels (TEST me: 9:00 ate	checks mae Judg	e: Dawn	le to WESSA)	
eeded)	Send entries to: Karen Lumb, N41 W27244 Roger Rd, Pewaukee, WI 53072					
	AGREEMENT					
innual I	Breed:	Reg.#:		Sex:	Date of Birth	
Pot Luck	AKC No. AKC Litt	er No.	Foreign	No.& list	coun-	
ether and	Full Name of Dog:		Ca	II Name:		
	Sire:					
ing Spaniels. ntry fee is	Dam:					
he test.						
	Name of Breeder:					
provide ham-						
:. You may I't care for	Owner's Address:					
taying for the I provide your	City:	S	itate:		Zip:	
	I					
b	Telephone:	En	nail:			
	I (we) agree that the club holding this event has the right to refuse this entry for cause which the club shall deem sufficient. In consideration of the acceptance of this entry and of the holding of this event and of the opportunity to have the dog judged and to win prizes, ribbons, or trophies. I (we) agree to hold the event-giving club, their members, directors, governors, officers, agents, superintendents or event secretary and the owner and/or lessor of the premises and any provider of services that are necessary to hold this event and any employees or volunteers of the afore- mentioned parties, and any judge, judging at this event, 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 about the event 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 for loss, injury or damage to this dog.					
st	Additionally, I (we) hereby assum save the aforementioned parties fees) by reason of the liability imp because of bodily injuries, includio con or porcoor	harmless from any an posed by law upon any ng death at any time r	d all loss and of the aforen esulting there	expense (in nentioned p from, susta	ncluding legal parties for damage ained by any per-	
each.	son or persons, including myself or in consequence of my (our) pa damage may be caused, and whe to have been caused by the negli agents or any other persons.	rticipation in this even ether or not the same	t, however su may have bee	ch, injuries	, death or property or may be alleged	
w.	Signature of owner or his agen	t duly authorized to	make this en	try:		
					Dated	
IE 10, 2016	(D)A(DV (Circle which to	(+)				
uog(s) in the W	/D WDX (Circle which te	:51)				

Name:	Tele:	Number of Practice Birds:				
Enclosed is my check payable to WESSA for to cover entry fees .						
SEND to: Karen Lumb N41 W27244 Roger Rd Pewaukee, WI 53072						