

COVID-19 Liability Release Waiver

- The World Health Organization has declared the novel Coronavirus (COVID-19) a worldwide pandemic. Due to its capacity to transmit from person-to-person through respiratory droplets, the government has set recommendations, guidelines, and some prohibitions which the **Gulf Coast JRT Network** (the "Organization") adheres to comply.

- In consideration of my participation in the foregoing, the undersigned acknowledge and agree to the following:

I am aware of the existence of the risk on my physical appearance to the venue and my participation to the activity of the Organization that may cause injury or illness such as, but not limited to Influenza, MRSA, or COVID-19 that may lead to paralysis or death.

I have not experienced symptoms that of fever, fatigue, difficulty in breathing, or dry cough or exhibiting any other symptoms relating to COVID-19 or any communicable disease within the last 14 days.

I have not, nor any member(s) of my household, traveled by sea or by air, internationally within the past 30 days.

I have not been, nor any member(s) of my household, diagnosed to be infected of COVID-19 virus within the last 30 days.

- Following the pronouncements above I hereby declare the following:

I am fully and personally responsible for my own safety and actions while and during my participation and I recognize that I may be in any case be at risk of contracting COVID-19.

With full knowledge of the risks involved, I hereby release, waive, discharge the Organization, its board, officers, independent contractors, affiliates, employees, representatives, successors, and assigns from any and all liabilities, claims, demands, actions, and causes of action whatsoever, directly or indirectly arising out of or related to any loss, damage, injury, or death, that may be sustained by me related to COVID-19 while participating in any activity while in, on, or around the premises or while using the facilities that may lead to unintentional exposure or harm due to COVID-19.

I agree to indemnify, defend, and hold harmless the Organization from and against any and all costs, expenses, damages, lawsuits, and/or liabilities or claims arising whether directly or indirectly from or related to any and all claims made by or against any of the released party due to injury, loss, or death from or related to COVID-19.

- By signing below I acknowledge that I have read the foregoing Liability Release Waiver and understand its contents; that I am at least eighteen (18) years old and fully competent to give my consent; That I have been sufficiently informed of the risks involved and give my voluntary consent in signing it as my own free act and deed; that I give my voluntary consent in signing this Liability Release Waiver as my own free act and deed with full intention to be bound by the same, and free from any inducement or representation.

This waiver will remain effective until laws and mandates relevant to COVID-19 are lifted.

• Printed
Name _____

• Signature _____ Date _____

CLASS SPONSORSHIP FORM - SATURDAY, MARCH 6, 2021

Please support the Club by sponsoring one or more classes of your choice.
\$12.00 per Class, \$25.00 for Best. \$50 for Championship, \$100.00 for an entire Division.
(Please List Three Classes In Order Of Preference)

Kennel or Business:

Name:

Saturday Class Preference:

(1) _____ (2) _____ (3) _____

Best _____ Championship _____ Division _____

Donation \$ _____



CLASS SPONSORSHIP FORM - SUNDAY, MARCH 7, 2021

Please support the Club by sponsoring one or more classes of your choice.
\$12.00 per Class, \$25.00 for Best. \$50 for Championship, \$100.00 for an entire Division.
(Please List Three Classes In Order Of Preference)

Kennel or Business:

Name:

Sunday Class Preference:

(1) _____ (2) _____ (3) _____

Best _____ Championship _____ Division _____

Donation \$ _____

"THANK YOU SO MUCH FOR YOUR SPONSORSHIP"

Owner Name _____
 Kennel Name _____
 Street _____
 City _____ State _____ Zip _____
 Phone _____ Cell Phone _____
 Email _____



Pre-entry Fees
 GCJRTN Members: \$12/class
 Non-members: \$15/class
 Post Entries: \$16/class
No Post Entries In Racing
 All entries postmarked after
 February 19, 2021 will be
 considered post-entries.

Trial Administrator
Jean Wallwin
 Please mail completed entry form to:
 Tracy Flora
 1521 LaDina Place
 Ellisville, MO 63011
 314-795-5410
tracy.flora233@gmail.com

Classes Entered	Terrier's Full Name	Owner's Name	Sex	Age	Birth Date	Height	Coat (R/B/S)	JRTCA Reg./Rec.#	Entry Fee

I hereby enter the above at my own risk, and I hereby engage to be responsible for any injury or damages that may occur to, or be caused by, any animals, vehicles, or trappings or the loss of any animal, vehicles, or trappings exhibited by me, and I further agree to be absolutely responsible for the physical condition of any animal under my control of ownership and will release, indemnify, and save harmless the Gulf Coast Jack Russell Terrier Network (GCJRTN) Trial, the agents of the GCJRTN, Leon County Expo Center/Buffalo, TX and the JRTCA, Inc. from any damage, expense, and/or liability arising out of or resulting from any act of the Exhibitor or the GCJRTN Terrier Trial or their agents or employees. I certify that my dogs are free from contagious disease, and that I am not a member of a conflicting JRT organization, nor do I register my Jack Russell Terriers with any conflicting JRT Club or all-breed registry.

Signed: _____ Date: _____

ATTENTION: You must be a current JRTCA member to participate in this trial. You may join the JRTCA to participate in this trial by filling out the application on the JRTCA website at www.therealjacksonsell.com or forms will be available at the entry table at our trials.

Is this your first trial? _____

If you have questions, please call Tracy Flora at 314-795-5410 or email tracy.flora233@gmail.com

You must send in a copy of your current 2021 JRTCA membership card with the pre-entry form.

2021 JRTCA Membership # _____

2021 JRTCA Membership Dues \$ _____

Please make a separate check payable to JRTCA.

JRTCA Admin. Fee @ \$2.00 per dog: # _____ Dogs entered: \$ _____

\$5.00 Admin fee for each dog not registered or recorded _____

Youth Handler Fee: _____

RV# nights _____ @ \$30per night _____

Class Sponsorship _____

Horse Stall Rental \$25/per wknd. _____

Ringside \$35/\$45 _____

Vendors \$35/\$45 _____

Sat.night dinner: # _____ @ \$20.00 _____

Chkn Fried Steak # _____ Chkn Breast # _____

GCJRTN Membership \$30.00 _____

Saturday Entry Fees _____

Owner Name _____
 Kennel Name _____
 Street _____
 City _____ State _____ Zip _____
 Phone _____ Cell Phone _____
 Email _____

Total Entry Fees (SAT) _____
 Total Entry Fees (SUN) _____
GRAND TOTAL ENTRY FEES:
 \$ _____
 Make Checks Payable To
 Gulf Coast JRT Network
 PayPal: payusnow@gcjrt.com
PLEASE PAY FEES

Pre-entry Fees
 GCJRTN Members: \$12/class
 Non-members: \$15/class
 Post Entries: \$16/class
No Post Entries in Racing
 All entries postmarked after
 Feb. 19, 2021 will be considered
 post-entries.

Trial Administrator
Jean Wallwin
 Please mail completed entry form to:
 Tracy Flora
 1521 LaDina Place
 Ellisville, MO 63011
 314-795-5410
tracy.flora233@gmail.com

Classes Entered	Terrier's Full Name	Owner's Name	Sex	Age	Birth Date	Height	Coat (R/B/S)	JRTCA Reg./Rec.#	Entry Fee

I hereby enter the above at my own risk, and I hereby engage to be responsible for any injury or damages that may occur to, or be caused by, any animals, vehicles, or trappings or the loss of any animal, vehicle, or trappings exhibited by me, and I further agree to be absolutely responsible for the physical condition of any animal under my control of ownership and will release, indemnify, and save harmless the Gulf Coast Jack Russell Terrier Network (GCJRTN) Trial, the agents of the GCJRTN, Leon County Expo Center/Buffalo, TX and the JRTCA, Inc. from any damage, expense, and/or liability arising out of or resulting from any act of the Exhibitor or the GCJRTN Terrier Trial or their agents or employees. I certify that my dogs are free from contagious disease, and that I am not a member of a conflicting JRT organization, nor do I register my Jack Russell Terriers with any conflicting JRT Club or all-breed registry.

Signed: _____ Date: _____

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2021 JRTCA Membership # _____

2021 JRTCA Membership Dues \$ _____
 Please make a separate check payable to JRTCA.

JRTCA Admin. Fee @ \$2.00 per dog: # _____ Dogs Entered: \$ _____
 \$5.00 Admin fee for each dog not registered or recorded _____
 Youth Handler Fee: _____
 Class Sponsorship _____
 GCJRTN Membership _____

Make checks payable to:
 GCJRTN
 Sunday Entry Fees _____

Gulf Coast Jack Russell Terrier Network – TEXAS TWO STEP SATURDAY & SUNDAY, MARCH 6 & 7, 2021
ENTRY FORM FOR CHILD/YOUTH HANDLER (ALL Pre-entries must be in Trial Vault or postmarked by 2/25/2021)

Handler's Name _____
 Street _____
 City _____ State _____ Zip _____
 Phone _____ Cell Phone _____
 Email _____

Youth Pre-Entry Fees:
 \$25.00 for 3 Classes or
 \$10.00 per Class
Youth Post Entries:
 \$30.00 for 3 Classes or
 \$12.00 per Class
Child Entries Are FREE
 No Post Entries in Racing

All entries postmarked after February 19, 2021 will be considered post-entries.

2 Runs @ LURE COURSE ARE FREE
 1 Run @ BRUSH HUNT IS FREE

Trial Administrator
 Jean Wallin

Please mail completed entry form to:
Tracy Flora
1521 Ladina Place
Ellisville, MO 63011
314-795-5410

tracy.flora233@gmail.com

Child Handlers \$5.00, and Youth Handler's pay \$10.00 at the Saturday Night Dinner IF accompanied by a parent.

Classes Entered	Child/Youth Handler's Name	Birthdate	Terrier's Full Name	Sex	Dog's Age	Birth Date	Height/Coat	JRTCA Reg:#	Entry Fee
Saturday									
Classes Entered									
Sunday									
	T-Shirt Size: Youth S-M-L-Adult S-M-L-XL								
	Sponsored by John Butler & Crystal Jones								

JRTCA Membership Number: _____

Please include a copy of your 2021 JRTCA membership card with your entries.

For further information:
 Tracy Flora ~ 314-795-5410
tracy.flora233@gmail.com

I hereby enter the above at my own risk, and I hereby engage to be responsible for any injury or damages that may occur to, or be caused by, any animals, vehicles, or trappings or the loss of any animal, vehicles, or trappings exhibited by me, and I further agree to be absolutely responsible for the physical condition of any animal under my control of ownership and will release, indemnify, and save harmless the Gulf Coast Jack Russell Terrier Network (GCJRTN) Trial, the agents of the GCJRTN, Leon County Expo Center/Bufalo, TX and the JRTCA, Inc. from any damage, expense, and/or liability arising out of or resulting from any act of the Exhibitor or the Gulf Coast Jack Russell Terrier Network (GCJRTN) Trial or their agents or employees. I hereby certify that my dogs are free from contagious disease, and that I am not a member of a conflicting JRT organization, nor do I register my Jack Russell Terriers with an Conflicting JRT Club or all-breed registry.

Signature: _____ (Parent or Guardian)
 Date: _____

Total Youth Entry Fees: _____
 Youth Dinner # _____ @ \$10.00 _____
 Child Dinner @ \$5.00 _____
 JRTCA Administrative Fee (\$2.00) per dog: _____
 \$5.00 Admin fee for each dog not registered or recorded: _____
 Make checks payable to GCJRTN
 Total Enclosed: _____