



# PRO-MOTION CANINE SHEEPDOG TRIAL

June 28-29, 2025

Hosted by Pro-Motion Canine at Widdel Farms, Minot ND

**Note: The trial field does have a fair number of gopher holes**

USBCHA Sanctioned with: 2 Open, 2 Nursery, 2 Pro-Novice, 1 Novice (Saturday)

Judges: Shannon Fritz (Open Judge) and Jamie Spring (Nursery Judge)

Entries Open: April 26th, 2025 and close May 26th, 2025. Entries may be limited

No money refunded after closing date without a vet release.

Entry Fees are US funds: Open – \$70.00/dog/trial  
 Nursery – \$60.00/dog/trial  
 Pro-Novice – \$60.00/dog/trial  
 Nursery – \$45.00/dog

**Camping available no hookups.**

Send entries to: Jessi Widdel

1211 163rd Ave SE

Minot, ND 58701

Make checks payable to: Pro-Motion Canine

Questions? Jessi Widdel: 701.541.0145 or pro.motion.canine@gmail.com

Dog	Op 1 \$70	Op 2 \$70	PN 1 \$60	PV 2 \$60	Nur 1 \$60	Nur 2 \$60	Nov 1 \$45	Entry Fee Dog Total

**Make checks payable to: Pro-Motion Canine**

Total Due \_\_\_\_\_

Please print legibly:

Name: \_\_\_\_\_

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

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

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

Read and sign: I certify that I am the owner or duly authorized agent of the owners of the dogs entered above. I agree Lee and Jessinta Widdel, Widdel Farms, Pro-Motion Canine, people volunteering help at/during the trial, and the property where the trial is held harmless from claim for loss or injury which may be alleged to have been caused directly or indirectly to any person, dog, stock or thing or possession while in or upon the trial area or near any entrance thereto and I assume all responsibility and liability for any such claim. I further agree to hold the aforementioned parties harmless from any and all claims for damages or injuries to the dog incurred due to negligence of or any of the aforementioned parties or by negligence of any other person or any other cause or causes. In case of injury to any stock by the dog, I will assume financial responsibility for any damages. I will pay \$400.00 for any sheep killed and/or seriously injured. And I will pay the veterinarian bill if so required.

Printed Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_