

RATINGS TEST PREMIUM LIST

WEIMARANER CLUB OF NORTHERN ILLINOIS

**SUNDAY MARCH 19 2017
DES PLAINES CONSERVATION
WILIMINGTON, ILLINOIS**

SHOOTING RATINGS TEST FOR WEIMARANERS

ENTRIES LIMITED to the number of dogs that can be run during all available daylight hours. Entries will close when this limit is reached if this occurs prior to the specified closing time.

This test is held under the Rules and Regulations of the
WEIMARANER CLUB OF AMERICA

WCA Ratings tests shall be open to all Weimaraners 6 months of age or older. All members and co-owners must be members of WCA. Spayed bitches and neutered dogs are eligible to participate. Bitches in season will be permitted to run last in these tests.

MAIL ADVANCE ENTRIES WITH CHECKS TO:

**GENE ROSE
6099 SOUTHFIELD LANE
OSWEGO, ILLINOIS 60543
PH# 1-630-975-9500. EMAIL:gene.rose4@gmail.com**

**ENTRIES WILL CLOSE ON SATURDAY MARCH 18 2017 AT 2.00 PM.
THE DRAWING WILL TAKE PLACE ON SATURDAY MARCH 18
2017**

**AT DES PLAINES CONSERVATION (EAST GROUNDS) AT 5:00 PM
BY THE RATINGS TEST SECRETARY.**

GPS COORDINATES: 41.33876,-88.171228

**THE DRAW WILL BE POSTED FIRST THING IN THE MORNING.
BEFORE THE RUNNING OF THE TEST!**

JUDGES AND TEST LEVELS

SDX, SD, NSD

JOE DELANEY: 97 SAN CARLOS RD ,MINOOKA,IL 60447

DENNIS NOWAK:2506 GAEL AVE ,JOLIET IL,60435



DIRECTIONS:

DIRECTIONS TO DES PLAINES CONSERVATION (EAST GROUNDS)
From the north,take I55 south to exit 241 (River road) at the top of the ramp
turn left on to rRiver road.Take River RD for about 1 mile to Boat House Rd
Turn right on to Boat House Rd,turn left into east grounds parking lot.
GPS Coordinates : 41,33876,-88.171228

NOTE;Coffee and donuts available in the morning of the test,along with
lunch and drinks will be available for a nominal fee.

Important:The ratings test rules have been upgrades,so take the time to
read the new rules,you can find the new rules on the WCA website.Go to
www.weimaranerclubofamerica.org

OFFICERS:

PRESIDENT: Sandra Hoesel N3307 Rock Rd ,Cascade, WI, 53011
VICE PRESIDENT: Bruce Bachall 1910 N Dayton St, Chicago, IL, 60614
SECRETARY: Laurie Sales 2519 Riverside Dr, Two Rivers,WI, 54241
TREASURER: Carol Barsema 908 Laguna Dr, McHenry, IL, 60051

RATINGS TEST COMMITTEE

FIELD CHAIRMEN: Mary Cernak 28913 Gouger Rd , Manhattan, IL 60442
SECRETARY:Gene Rose 6099 Southfield Lane, Oswego ,IL 60543
WCA REP: Mike Bertolani 1221 Sunnymeade Trail, DeKalb, IL, 60115
MARSHALL:Jennifer Bertolani 1221 Sunnymeade Trail, DeKalb, IL 60115

ORDER OF RATINGS TEST AND COST

SHOOTING DOG EXCELLENT	8:00 AM	COST \$45.00
SHOOTING DOG	TO FOLLOW SDX	COST \$45.00
NOVICE SHOOTING DOG	TO FOLLOW SD	COST \$45.00

COURSES AND BIRDS

All testing levels will be run on a single course with bird field

Blaze orange is required of all participants

QUAIL WILL BE USED

Other game species may be encountered.

All gunning will be done only on liberated game in the designated bird field and only
by official guns.

CAPTAIN OF THE GUNS:

JOHN CERNAK

PRIZES: WCA Qualifying Ribbon to all dogs receiving a qualifying score

Note: This form must be completed in full for Ratings Tests

Weimaraner Club of America

DES PLAINES CONSERVATION AREA, EAST GROUNDS

MARCH 19 2017

I submit \$ _____ for entry fees
Enter in Test (circle one) SDX SD NSD

Name of dog (print) _____

Call name _____ Date of birth _____

AKC reg. # _____ or AKC litter # _____

Or foreign reg. # _____ and country of reg. _____

Or ILP # _____

Breed **Weimaraner** Male () or Female ()

Sire's name _____

Dam's name _____

Breeder _____

Name of owner (print) _____

Owner's address; Street _____

City _____ State _____ Zip _____

Name of handler (print) _____

I certify that I am the actual owner of the dog, or that I am the duly authorized agent of the actual owner whose name I have entered above. In consideration of the acceptance of this entry, I agree to abide by all the rules of The Weimaraner Club of America and the rules applying to registration and discipline of the American Kennel Club that the WCA is a member club of, I further agree that the dog is entered in and will be at this trial at my own risk and that I will hold the test giving club, its members and agents free from liability for any claims arising out of the entry of the dog or its presence at the test.

Signature of owner or agent duly

Authorized to make this entry _____

Address of agent if agent signs
above line for owner: Street _____

City _____ State _____ Zip _____

Telephone # _____ Email _____

Note: This form must be completed in full for Ratings Tests
Weimaraner Club of America
DES PLAINES CONSERVATION AREA, EAST GROUNDS
MARCH 19 2017

I submit \$ _____ for entry fees
Enter in Test (circle one) SDX SD NSD

Name of dog (print) _____

Call name _____ Date of birth _____

AKC reg. # _____ or AKC litter # _____

Or foreign reg. # _____ and country of reg. _____

Or ILP # _____

Breed **Weimaraner** Male () or Female ()

Sire's name _____

Dam's name _____

Breeder _____

Name of owner (print) _____

Owner's address; Street _____

City _____ State _____ Zip _____

Name of handler (print) _____

I certify that I am the actual owner of the dog, or that I am the duly authorized agent of the actual owner whose name I have entered above. In consideration of the acceptance of this entry, I agree to abide by all the rules of The Weimaraner Club of America and the rules applying to registration and discipline of the American Kennel Club that the WCA is a member club of, I further agree that the dog is entered in and will be at this trial at my own risk and that I will hold the test giving club, its members and agents free from liability for any claims arising out of the entry of the dog or its presence at the test.

Signature of owner or agent duly

Authorized to make this entry _____

Address of agent if agent signs
above line for owner: Street _____

City _____ State _____ Zip _____

Telephone # _____ **Email** _____

Note: This form must be completed in full for Ratings Tests
Weimaraner Club of America
DES PLAINES CONSERVATION AREA , EAST GROUNDS
MARCH 19 2017

I submit \$ _____ for entry fees
Enter in Test (circle one) SDX SD NSD

Name of dog (print) _____

Call name _____ Date of birth _____

AKC reg. # _____ or AKC litter # _____

Or foreign reg. # _____ and country of reg. _____

Or ILP # _____

Breed **Weimaraner** Male () or Female ()

Sire's name _____

Dam's name _____

Breeder _____

Name of owner (print) _____

Owner's address; Street _____

City _____ State _____ Zip _____

Name of handler (print) _____

I certify that I am the actual owner of the dog, or that I am the duly authorized agent of the actual owner whose name I have entered above. In consideration of the acceptance of this entry, I agree to abide by all the rules of The Weimaraner Club of America and the rules applying to registration and discipline of the American Kennel Club that the WCA is a member club of, I further agree that the dog is entered in and will be at this trial at my own risk and that I will hold the test giving club, its members and agents free from liability for any claims arising out of the entry of the dog or its presence at the test.

Signature of owner or agent duly

Authorized to make this entry _____

Address of agent if agent signs
above line for owner: Street _____

City _____ State _____ Zip _____

Telephone # _____ **Email** _____