

## FIRST CLASS • DATED MATERIAL

Karen Sanders, FTS  
Mail entries to: 13120 SE Wiese Rd Damascus, OR. 97089  
503-658-4363(house)  
503-819-5217(cell)  
[allagantesilkens@yahoo.com](mailto:allagantesilkens@yahoo.com)

**Site: Tacoma Polo Club**  
29125 8<sup>th</sup> Ave S, Roy WA.

### Directions to the Site:

**Location:** Tacoma Polo Club, 29125 8th Ave S, Roy, WA.

Please be aware that the GPS directions may take you to the wrong entrance. There are two entrances to the property. The property owners request you DO NOT use the entrance on 288th. PLEASE enter only from 8th Ave S. See directions below:

**From the North:** From I-5 take exit #127 (Hwy 512 Puyallup exit) towards Puyallup. Take the Pacific Ave exit(Hwy 7) and turn right. Go south on Pacific Ave approximately 5 miles to the Roy "Y" and bear right on WA-507/Spanaway McKenna Hwy. Go 1.2 miles and turn slightly left onto 8th Ave. Go 5.2 miles and turn left into the first driveway after the flashing yellow light at the 288th St. intersection. Follow the dirt road to the club house and find a place to park.

**From the South:** Take I-5 exit 88 for Tenino. Turn right onto Old Hwy 99 SW/Tenino Grand Mound Rd SW. Go 7.7 miles and turn left onto Old Hwy 99 SE/S Wichman St. Go 14 miles and turn right onto WA-507 N/E Yelm Ave. Continue to follow Hwy 507 for 2.9 miles and turn right onto WA-702 E/352nd St S/McKenna Tanwax. Go 5.3 miles to flashing yellow light and turn left on 8th Ave. Go approx. 3.5 miles. The Polo Field is down a dirt road in the trees on the right just before the 288th Street intersection (flashing yellow light), and will be marked with signage. Follow dirt road to the club house and find a place to park.

**Cell phones on the Field –**  
Karen Sanders – 503-819-5217  
Jennifer Behrens – 916-612-3249

**WATER is not available but limited SHADE IS AVAILABLE ON SITE~~ OVERNIGHT PARKING IS PER permitted at no charge-----NO HOOK-UPS**

## PREMIUM LIST

EARLY ENTRIES CLOSE 9:00 PM, WEDNESDAY, Sept 2nd, 2026  
Send to: 13120 SE Wiese Rd; Damascus OR 97089

**email or snail mail to FTS**

## SWEPT

Silken Windhounds for Endurance, Performance & Training

**ASFA ALL-BREED TRIAL**  
SINGLES & LCI LIMITED TO 10 ENTRIES

### REGION 1

**ASFA, Saturday September 5th, 2026**

Site: Tacoma Polo Club  
29125 8<sup>th</sup> Ave S, Roy, WA

**Inspection 8:00 AM - Roll Call – 8:30 AM**

#### Early Entry Fees

FIRST HOUND ..... \$25.00  
ALL ADDITIONAL HOUNDS ..... \$20.00

#### Day of Trial Fees

ALL HOUNDS ..... \$35.00

Please note: Checks to be made to SWEPT for this event – All amounts are in U.S. Currency

Paypal is [SWEPTTreasurer@yahoo.com](mailto:SWEPTTreasurer@yahoo.com)

**LIMITED (7) CERTIFICATIONS WILL BE OFFERED/RUN AT 7:30 AM Saturday morning – contact FTS as soon as possible to reserve your dog's spot – must have your own by dog.**

**Send in your ASFA Hound Certification form and payment (\$10.00) to reserve your place.**

**Owners of certifying hounds must supply a by-dog to run with their hound. Hounds completing Certifications at this event may enter the all-breed Trial on Saturday September 5<sup>th</sup>, 2026 at the Early Entry rates.**

*Permission has been granted by the American Sighthound Field Association by Samantha Duryee, Scheduling Chairperson for the holding of this event under ASFA Rules and Regulations.*  
**ASFA Scheduling Committee**

Go to [www.ASFA.org](http://www.ASFA.org)  
For online Rulebook, Policies, Contacts, Clubs,

## Trial Schedules, Trial Results & much more.

### SWEPT-Silken Windhounds for Endurance, Performance & Training

President.....Greg Behrens  
 Vice President.....Lara Kropp  
 Secretary.....Tammy Mills  
 Treasurer.....Karen Sanders

#### JUDGES

Charles Robert.....Oregon City, OR  
 Paul Sanders.....Damascus, OR

#### SATURDAY

| JUDGE   | A | Az | Ba | B | C | G | Ib | IW | IG | P<br>I<br>O | P | R | S | S<br>D | SI | SW | W | S<br>gl | P<br>r<br>o | L<br>C<br>I |
|---------|---|----|----|---|---|---|----|----|----|-------------|---|---|---|--------|----|----|---|---------|-------------|-------------|
| Charles | X | X  | X  | X | X | X | X  | X  | X  | X           | X | X | X | X      | X  | S  | X | X       | X           | X           |
| Paul    | * | *  | X  | * | * | X | *  | *  | X  | *           | * | X | * | *      | *  |    | X | X       | *           | X           |

S= Single Judge    \* = Provisional Judge    # = Canadian Judge

#### FIELD COMMITTEE

Chairman.....Greg Behrens  
 Secretary.....Karen Sanders.....allagantesilkens@yahoo.com  
 13120 SE Wiese Rd; Damascus, OR. 97089.....503-819-5217  
 Lure Ops.....George Stone, Paul Sanders, Greg Behrens

TRIAL HOURS: 7:30 AM UNTIL AFTER RIBBONS ARE AWARDED.

**Day of Trial entries close at 8 AM**

**Substitutions (same owner) until 8 AM**

**ROLL CALL: PROMPTLY at 8:30 AM**

ENTRIES WILL NOT BE ACKNOWLEDGED BY RETURN MAIL OR PHONE;  
 ENTRIES MAY BE ACKNOWLEDGED BY E-MAIL  
 IF OWNER FORWARDS E-MAIL ADDRESS.

**Ribbons or rosettes will offered for all placements.**

**First=Blue, Second=Red, Third=Yellow, Fourth=White, NBQ=Green**  
**Highest Scoring Single=Navy/Gold, Best of Breed=Purple/Gold,**  
**& Best in Field=Red, White & Blue.**

**BEST IN FIELD WILL BE OFFERED**

### ELIGIBLE BREEDS & REGISTRY

Only purebred Afghan Hounds, Azawakhs, Basenjis, Borzoi, Cirneco dell'Etna, Greyhounds, Ibizan Hounds, Irish Wolfhounds, Italian Greyhounds, Peruvian Inca Orchids, Pharaoh Hounds, Rhodesian Ridgebacks, Salukis, Scottish Deerhounds, Sloughis, Silken Windhounds and Whippets may be entered in the regular stakes.

Provisional breeds may be entered in the Provisional Stake or the Singles Stake. Provisional breeds are listed on the ASFA website and must be individually registered with the appropriate registry.

All entries in the regular stakes shall be individually registered with the American Kennel Club, the National Greyhound Association (NGA), including the United Kennel Club (UKC), the Federation Cynologique Internationale (FCI), an ASFA-recognized foreign or ASFA Board approved registry or possess a critique registration number (CRN) from the Society for the Perpetuation of Desert Bred Salukis (SPDBS). Provisional stake entries shall be individually registered with the appropriate registry. (Dogs with an Indefinite Listing Privilege (ILP) or Purebred Alternate Listing (PAL) from the American Kennel Club shall be considered registered with that body.)

### REGULAR STAKES OFFERED

**OPEN STAKE:** Any eligible sighthound, excluding ASFA Field Champions of record that has met the certification requirements.

**FIELD CHAMPION STAKE:** Any ASFA Field Champion

**VETERAN STAKE:** any eligible hound whose age is at least six years, except Irish Wolfhounds, whose age shall be at least five years, and Afghan Hounds, Ibizan Hounds, Rhodesian Ridgebacks, Salukis, and Whippets, whose age shall be at least seven years. That has obtained an ASFA certification, AKC QC, or other qualifying waivers prior to the closing date. A copy of the certificate MUST be submitted with the entry forms. Points go toward V-FCh or V-LCM titles.

**PROVISIONAL STAKE:** Any eligible sighthound of a Provisional breed that has met certification requirements. Not eligible to compete in Best of Breed or Best in Field.

**SINGLES STAKE:** Any eligible sighthound including those disqualified to run in other stakes. Each hound runs alone. Not eligible for Best of Breed or Best in Field. Hounds are eligible to earn TCP and CPX titles from the Singles stake.

### LCI STAKES OFFERED

**LURE CHASING INSTINCT (LCI) Stake:** Open to NON sighthounds and sighthoundmixes. All entries shall be individually registered with the AKC (including ILP & PAL) or the UKC. A photocopy of acceptable registry must be submitted with each dog's first ASFA field trial entry. Dogs without a recognized registry number may obtain an ASFA ID number for a \$10 registration fee at time of entry.

**SMALL OPEN:** for dogs 17-1/2 inches or less at the withers and / or brachycephalic ("flat-faced") dogs who have not achieved the title of LCC.

**SMALL EXCELLENT:** for dogs 17-1/2 inches or less at the withers and/or brachycephalic dogs who have achieved the title of LCC.

**SMALL VETERAN:** for dogs 17-1/2 inches or less at the withers and/or brachycephalic dogs over the age of 7 years.

**LARGE OPEN:** for dogs over 17-1/2 inches at the withers who have not achieved the title of LCC.

**LARGE EXCELLENT:** is for dogs over 17-1/2 inches at the withers who have achieved the title of LCC.

**LARGE VETERAN:** for dogs over 17-1/2 inches at the withers who are over the age of 7 years.

**SIGHTHOUND MIX OPEN:** for dogs with a sighthound breed in its background who have not achieved the title of LCC.

**SIGHTHOUND MIX EXCELLENT:** for dogs with sighthound breed in its background who have achieved the title of LCC.

**SIGHTHOUND MIX VETERAN:** for dogs with sighthound breed in its background over the age of 7 years.

When running as a stake within a regular ASFA trial, Small will run 50% of the ASFA course as laid out for the sighthounds up to a maximum of 400 yards. All other stakes will run the full ASFA laid out course length

**Conditions of Entry:** All entries must be one year or older on the day of the trial • Stakes will be split into flights by public random draw if the entry in any regular stake is 20 or more • Bitches in season, lame hounds and hounds with breed disqualifications will be excused at roll call. • Spayed, neutered, monorchid or cryptorchid hounds without breed disqualifications may be entered; hounds with breed disqualifications are not eligible to enter except in the Single Stake • Hounds not present at the time of roll call will be scratched • All hounds will run twice, in trios if possible or braces (except in the Single Stake), unless excused, dismissed or disqualified. • Any hound that displays aggressive behavior during trial hours will be excused for the day without refund of entry fee. • A penalty of \$5.00 will be assessed for any loose hound not competing in the course in progress. • A penalty of \$5.00 will be assessed for any waste material left of the grounds by a dog or person. This also includes trash. Waste and trash disposal equipment and containers will be available.

**Equipment:** Type of lure machine: battery-powered drag system. • Type of lures: highly-visible white plastic strips • Back-up equipment will be available.

**Veterinarian on call:**

ER Vet Finder: <https://www.facebook.com/ervetsofww/>

Use this site to find additional emergency vet options if there is no availability at the clinics listed below.

Spanaway Veterinary Clinic (~8 miles from field)

253-537-4356. 16920 Pacific Ave S, Spanaway, WA, [spanawayvet.com](http://spanawayvet.com)

Hours: Weekdays 7-6, Saturday 8-6.

Directions from the field: Turn right on 8th Ave. Go 5 miles and turn right on WA-507. Go approximately 1 mile and turn left on WA-7. Go 1.3 miles to clinic.

BluePearl Tacoma (~18 miles from the field)

253-474-0791. 2510 84th St. S, Ste. 30D, Lakewood, WA 98499,

[bluepearlveter.com/hospital/tacoma-wa](http://bluepearlveter.com/hospital/tacoma-wa)

Hours: 24 hour emergency care.

Directions from the field: Turn right on 8th Ave. Go 5 miles and turn right on WA-507. Go approximately 1 mile and turn left on WA-7. Go 4.67 miles and turn left on 116th St S. Turn right at the next intersection onto C St S and follow for 0.4 miles and continue onto Park Ave S. Go 0.8 miles and keep left to continue on Yakima Ave S for another 0.9 miles. Turn left onto S 84th St and continue for 1.3 miles. Look for clinic on the left.

**Accommodations:**

Camping (no hookups) is allowed on the field at no charge.

Please contact each establishment directly for pet fees and policies.

Prairie Hotel (~13 miles from field) 360-458-8300, 701 Prairie Park Ln., Yelm, WA,

La Quinta Inn & Suites by Wyndham Tacoma-Seattle (~17 miles from field)

253-383-0146, 1425 East 27th St, Tacoma, WA,

La Quinta Inn® by Wyndham Olympia-Lacey (~30 miles from field)

360-412-1200, 4704 Park Center Avenue NE, Lacey, WA,

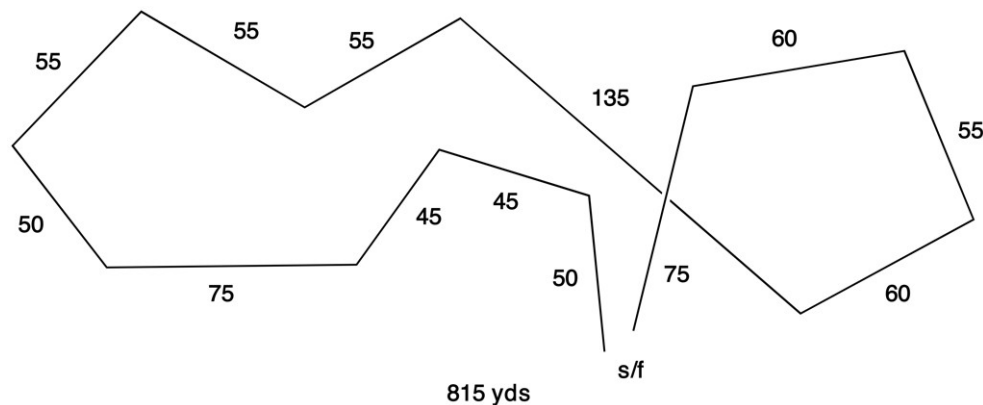
Lakeview Inn 1325 Lakeshore Dr. Centralia, WA, 98531 20 miles, 21 minutes driving time

with no traffic 2 dog limit, 50# max weight limit (800)491-9657

**SATURDAY COURSE**

The club reserves the right to alter the course diagram as required by weather and/or field conditions on the day of the trial.

**Course will be reversed for final courses.-Total course 815 yards**



## OFFICIALAMERICAN SIGHTHOUND FIELD ASSOCIATIONENTRY FORM

## SWEPT

## ASFA ALL BREED – SATURDAY Sept 5TH, 2026

Early Entries close Wednesday, Sept 2nd., 2026, 9:00 PM

Early Entries fees: 1<sup>st</sup> hound \$25.00 & each additional hound \$20.00

Day-of-Trial Entries \$35.00 for each hound / limit of 10 singles/LCI entries

Make checks payable to **SWEPT**. Payable in US Funds. Mail to:

Karen Sanders, Field Trial Secretary, 13120 SE Wiese Rd., Damascus OR 97089

Fee Paid \_\_\_\_\_ The Field Secretary cannot accept conditional, unsigned, incomplete, or unpaid entries; please check your completed entry carefully.

|                                                                                                                                                                                                                                                                                                                           |                                 |                                                                                                                      |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|----------------------------------------------------------------------------------------------------------------------|--|
| Breed:                                                                                                                                                                                                                                                                                                                    | Call Name:                      |                                                                                                                      |  |
| Registered Name of Hound:                                                                                                                                                                                                                                                                                                 |                                 |                                                                                                                      |  |
| Stake: <input type="checkbox"/> Open <input type="checkbox"/> FCH <input type="checkbox"/> Veteran<br><input type="checkbox"/> Singles <input type="checkbox"/> Provisional                                                                                                                                               |                                 | Additional Stakes<br><input type="checkbox"/> Kennel <input type="checkbox"/> Breeder <input type="checkbox"/> Bench |  |
| Registration Number:<br>(please write in registering body before number)                                                                                                                                                                                                                                                  |                                 |                                                                                                                      |  |
| <input type="checkbox"/> If possible, please separate my hounds                                                                                                                                                                                                                                                           | Date of Birth:                  | Sex:<br><input type="checkbox"/> Dog <input type="checkbox"/> Bitch                                                  |  |
| Name of actual owner(s):                                                                                                                                                                                                                                                                                                  |                                 |                                                                                                                      |  |
| Address:                                                                                                                                                                                                                                                                                                                  |                                 | Phone:                                                                                                               |  |
| City:                                                                                                                                                                                                                                                                                                                     | State:                          | Zip:                                                                                                                 |  |
| E-mail                                                                                                                                                                                                                                                                                                                    | (Optional) Region of Residence: |                                                                                                                      |  |
| Emergency Contact Name and Phone (Optional)                                                                                                                                                                                                                                                                               |                                 |                                                                                                                      |  |
| <input type="checkbox"/> Check if this is the first ASFA trial for this hound. Attach a Hound Certification or waiver if entered in Open, Veterans, Provisional.<br><input type="checkbox"/> Check if this is a first-time entry, a copy of the official Registration of this hound must accompany this entry unless NGA. |                                 |                                                                                                                      |  |
| <input type="checkbox"/> Check if any information has changed since the last ASFA trial entry. Regarding _____                                                                                                                                                                                                            |                                 |                                                                                                                      |  |
| <input type="checkbox"/> Check if this hound has been dismissed within the last 6 trials entered. Must be marked in order to qualify for a "clean" trial requirement.                                                                                                                                                     |                                 |                                                                                                                      |  |

I CERTIFY that I am the actual owner of this 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 and the opportunity to have this dog judged and to win prize money, ribbons, or trophies, I (we) agree to abide by the rules and regulations of the American Sighthound Field Association in effect at the time of this lure field trial, and by any additional rules and regulations appearing in the premium list for this lure field trial. I (we) agree that the club holding this lure field trial has the right to refuse this entry for cause, which the club shall deem to be sufficient. I (we) agree to hold this club, its members, directors, governors, officers, agents or other functionaries, any employees of the aforementioned parties and the owner(s) of the trial premises or grounds 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 upon the lure field trial 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 loss of this dog by disappearance, theft damage or injury be caused or alleged to be caused by the negligence of the club or any of the aforementioned parties or by the negligence of any person or any other cause or causes. I (we) certify and represent that the dog entered is not a hazard to person or other dogs. This entry is submitted for acceptance of the forgoing representations and agreements.

**SIGNATURE** of owner or his agent  
duly authorized to make this entry \_\_\_\_\_

EF-A ~ rev 03-17© **Please separate the entries before submitting to FTS.**

## OFFICIALAMERICAN SIGHTHOUND FIELD ASSOCIATIONENTRY FORM

## SWEPT

## ASFA ALL BREED – SATURDAY Sept 5th, 2026

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|                                                                                                                                                                                                                                                                                                                           |                                 |                                                                                                                      |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|----------------------------------------------------------------------------------------------------------------------|--|
| Breed:                                                                                                                                                                                                                                                                                                                    | Call Name:                      |                                                                                                                      |  |
| Registered Name of Hound:                                                                                                                                                                                                                                                                                                 |                                 |                                                                                                                      |  |
| Stake: <input type="checkbox"/> Open <input type="checkbox"/> FCH <input type="checkbox"/> Veteran<br><input type="checkbox"/> Singles <input type="checkbox"/> Provisional                                                                                                                                               |                                 | Additional Stakes<br><input type="checkbox"/> Kennel <input type="checkbox"/> Breeder <input type="checkbox"/> Bench |  |
| Registration Number:<br>(please write in registering body before number)                                                                                                                                                                                                                                                  |                                 |                                                                                                                      |  |
| <input type="checkbox"/> If possible, please separate my hounds                                                                                                                                                                                                                                                           | Date of Birth:                  | Sex:<br><input type="checkbox"/> Dog <input type="checkbox"/> Bitch                                                  |  |
| Name of actual owner(s):                                                                                                                                                                                                                                                                                                  |                                 |                                                                                                                      |  |
| Address:                                                                                                                                                                                                                                                                                                                  |                                 | Phone:                                                                                                               |  |
| City:                                                                                                                                                                                                                                                                                                                     | State:                          | Zip:                                                                                                                 |  |
| E-mail                                                                                                                                                                                                                                                                                                                    | (Optional) Region of Residence: |                                                                                                                      |  |
| Emergency Contact Name and Phone (Optional)                                                                                                                                                                                                                                                                               |                                 |                                                                                                                      |  |
| <input type="checkbox"/> Check if this is the first ASFA trial for this hound. Attach a Hound Certification or waiver if entered in Open, Veterans, Provisional.<br><input type="checkbox"/> Check if this is a first-time entry, a copy of the official Registration of this hound must accompany this entry unless NGA. |                                 |                                                                                                                      |  |
| <input type="checkbox"/> Check if any information has changed since the last ASFA trial entry. Regarding _____                                                                                                                                                                                                            |                                 |                                                                                                                      |  |
| <input type="checkbox"/> Check if this hound has been dismissed within the last 6 trials entered. Must be marked in order to qualify for a "clean" trial requirement.                                                                                                                                                     |                                 |                                                                                                                      |  |

I CERTIFY that I am the actual owner of this 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 and the opportunity to have this dog judged and to win prize money, ribbons, or trophies, I (we) agree to abide by the rules and regulations of the American Sighthound Field Association in effect at the time of this lure field trial, and by any additional rules and regulations appearing in the premium list for this lure field trial. I (we) agree that the club holding this lure field trial has the right to refuse this entry for cause, which the club shall deem to be sufficient. I (we) agree to hold this club, its members, directors, governors, officers, agents or other functionaries, any employees of the aforementioned parties and the owner(s) of the trial premises or grounds 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 upon the lure field trial 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 loss of this dog by disappearance, theft damage or injury be caused or alleged to be caused by the negligence of the club or any of the aforementioned parties or by the negligence of any person or any other cause or causes. I (we) certify and represent that the dog entered is not a hazard to person or other dogs. This entry is submitted for acceptance of the forgoing representations and agreements.

**SIGNATURE** of owner or his agent  
duly authorized to make this entry \_\_\_\_\_

EF-A ~ rev 03-17© **Please separate the entries before submitting to FTS.**

**AMERICAN SIGHTHOUND FIELD ASSOCIATION  
HOUND CERTIFICATION**

**Rule effective October 1, 1994: Ch. V, Sec. 4 (a) OPEN STAKE:***To be eligible to enter the open stake, a hound must have been certified by a licensed judge within the year preceding the closing date for the entry or have previously competed in the Open Stake.* This eligibility requirement also applies to a hound entered in the Limited or Veteran Stake, which has not competed in Open previously. Please complete this portion of this form and attach it to the entry form for the hound's first entry, including an entry for a Fun Trial.

Registered Name of Hound: \_\_\_\_\_

Registration Number: \_\_\_\_\_ Breed: \_\_\_\_\_

Registered Owner's Name: \_\_\_\_\_

I hereby certify that on (date) \_\_\_\_\_, the above named hound completed a lure course of at least 500 yards, running with another hound of the same breed (or another breed with a similar running style). During the course the above named hound showed no inclination to interfere with the other hound. I further certify that I am a licensed judge for the ASFA.

Name of Licensed Judge: \_\_\_\_\_

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

I hereby certify that the hound running in the certification course is the hound identified above and that information provided on this form is true and correct.

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

**Owner or Authorized Agent of Hound**

This certification form must be attached to the entry form the first time this hound is entered in an open, limited, or veteran stake. Any hound entered in open, limited, or veteran (as a first time entered hound), which has not been certified, shall be declared ineligible by the records coordinator and shall forfeit any points and placements awarded.

**PLEASE RETAIN A COPY FOR YOUR RECORDS.**

**AMERICAN SIGHTHOUND FIELD ASSOCIATION  
HOUND CERTIFICATION WAIVER**

**Waiver of Requirement:***This requirement will be waived for a hound that has earned a lure coursing title from another recognized organization, if such title requires competition, and if a waiver for such title has been approved by the ASFA, or a CKC Hound Certification Form.* If your hound qualifies for a waiver, complete this portion of this form and attach it to your entry form. Proof of waivers must accompany this certification form.

Registered Name of Hound: \_\_\_\_\_

Registration Number: \_\_\_\_\_ Breed: \_\_\_\_\_

Registered Owner's Name: \_\_\_\_\_

CKC: FCH FCHX

AKC: QC SC FC

Hound Certification previously submitted.

I hereby certify that the hound identified above has completed the requirements for the title indicated above (or that the required Certification was previously submitted) and that the information provided on this form is true and correct.

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

Owner or Authorized Agent of Hound

**AMERICAN SIGHTHOUND FIELD ASSOCIATION  
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**Rule effective October 1, 1994: Ch. V, Sec. 4 (a) OPEN STAKE:***To be eligible to enter the open stake, a hound must have been certified by a licensed judge within the year preceding the closing date for the entry or have previously competed in the Open Stake.* This eligibility requirement also applies to a hound entered in the Limited or Veteran Stake, which has not competed in Open previously. Please complete this portion of this form and attach it to the entry form for the hound's first entry, including an entry for a Fun Trial.

Registered Name of Hound: \_\_\_\_\_

Registration Number: \_\_\_\_\_ Breed: \_\_\_\_\_

Registered Owner's Name: \_\_\_\_\_

I hereby certify that on (date) \_\_\_\_\_, the above named hound completed a lure course of at least 500 yards, running with another hound of the same breed (or another breed with a similar running style). During the course the above named hound showed no inclination to interfere with the other hound. I further certify that I am a licensed judge for the ASFA.

Name of Licensed Judge: \_\_\_\_\_

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

I hereby certify that the hound running in the certification course is the hound identified above and that information provided on this form is true and correct.

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

**Owner or Authorized Agent of Hound**

This certification form must be attached to the entry form the first time this hound is entered in an open, limited, or veteran stake. Any hound entered in open, limited, or veteran (as a first time entered hound), which has not been certified, shall be declared ineligible by the records coordinator and shall forfeit any points and placements awarded.

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Registered Name of Hound: \_\_\_\_\_

Registration Number: \_\_\_\_\_ Breed: \_\_\_\_\_

Registered Owner's Name: \_\_\_\_\_

CKC: FCH FCHX

AKC: QC SC FC

Hound Certification previously submitted.

I hereby certify that the hound identified above has completed the requirements for the title indicated above (or that the required Certification was previously submitted) and that the information provided on this form is true and correct.

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

Owner or Authorized Agent of Hound

OFFICIALAMERICAN SIGHTHOUND FIELD ASSOCIATION  
LCI ENTRY FORM

SWEPT

ASFA ALL BREED – SATURDAY Sept 5th, 2026

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Make checks payable to **SWEPT**. Payable in US Funds. Mail to:

Karen Sanders, Field Trial Secretary, 13120 SE Wiese Rd., Damascus OR 97089

Fee Paid \_\_\_\_\_ The Field Secretary cannot accept conditional, unsigned, incomplete or unpaid entries; please check your completed entry carefully.

|                                                                                                                                                                                                                  |                                                                     |        |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|--------|--|
| Breed:                                                                                                                                                                                                           | Call Name:                                                          |        |  |
| Registered Name of dog:                                                                                                                                                                                          |                                                                     |        |  |
| Stake: <input type="checkbox"/> LCI-Small <input type="checkbox"/> LCI-Large <input type="checkbox"/> LCI-Sighthound Mix                                                                                         |                                                                     |        |  |
| <input type="checkbox"/> Open <input type="checkbox"/> Excellent <input type="checkbox"/> Veteran                                                                                                                |                                                                     |        |  |
| Registration Number:<br>(please write in registering body before number)                                                                                                                                         |                                                                     |        |  |
| Date of Birth:                                                                                                                                                                                                   | Sex:<br><input type="checkbox"/> Dog <input type="checkbox"/> Bitch |        |  |
| Name of actual owner(s):                                                                                                                                                                                         |                                                                     |        |  |
| Address:                                                                                                                                                                                                         |                                                                     | Phone: |  |
| City:                                                                                                                                                                                                            | State:                                                              | Zip:   |  |
| E-mail                                                                                                                                                                                                           | (Optional) Region of Residence:                                     |        |  |
| Emergency Contact Name and Phone (Optional)                                                                                                                                                                      |                                                                     |        |  |
| <input type="checkbox"/> Check if this is a first-time entry, a copy of the official Registration of this hound must accompany this entry. (i.e., AKC Registration form, PAL registration, Canine Partner, etc.) |                                                                     |        |  |
| <input type="checkbox"/> Check if any information has changed since the last ASFA trial entry. Regarding _____                                                                                                   |                                                                     |        |  |

I CERTIFY that I am the actual owner of this 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 and the opportunity to have this dog judged and to win prize money, ribbons, or trophies, I (we) agree to abide by the rules and regulations of the American Sighthound Field Association in effect at the time of this lure field trial, and by any additional rules and regulations appearing in the premium list for this lure field trial. I (we) agree that the club holding this lure field trial has the right to refuse this entry for cause, which the club shall deem to be sufficient. I (we) agree to hold this club, its members, directors, governors, officers, agents or other functionaries, any employees of the aforementioned parties and the owner(s) of the trial premises or grounds 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 upon the lure field trial 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 loss of this dog by disappearance, theft damage or injury be caused or alleged to be caused by the negligence of the club or any of the aforementioned parties or by the negligence of any person or any other cause or causes. I (we) certify and represent that the dog entered is not a hazard to person or other dogs. This entry is submitted for acceptance of the forgoing representations and agreements.

SIGNATURE of owner or his agent  
duly authorized to make this entry \_\_\_\_\_

Please separate the entries before submitting to FTS.

OFFICIALAMERICAN SIGHTHOUND FIELD ASSOCIATION  
LCI ENTRY FORM

SWEPT

ASFA ALL BREED –SATURDAY Sept 5th, 2026

Early Entries close Wednesday, Sept 2nd, 2026, 9:00 PM

Early Entries fees: 1<sup>st</sup> hound \$25.00 & each additional hound \$20.00

Day-of-Trial Entries \$35.00 for each hound / limit of 10 singles/LCI entries

Make checks payable to **SWEPT**. Payable in US Funds. Mail to:

Karen Sanders, Field Trial Secretary, 13120 SE Wiese Rd., Damascus OR 97089

Fee Paid \_\_\_\_\_ The Field Secretary cannot accept conditional, unsigned, incomplete or unpaid entries; please check your completed entry carefully.

|                                                                                                                                                                                                                  |                                                                     |        |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|--------|--|
| Breed:                                                                                                                                                                                                           | Call Name:                                                          |        |  |
| Registered Name of dog:                                                                                                                                                                                          |                                                                     |        |  |
| Stake: <input type="checkbox"/> LCI-Small <input type="checkbox"/> LCI-Large <input type="checkbox"/> LCI-Sighthound Mix                                                                                         |                                                                     |        |  |
| <input type="checkbox"/> Open <input type="checkbox"/> Excellent <input type="checkbox"/> Veteran                                                                                                                |                                                                     |        |  |
| Registration Number:<br>(please write in registering body before number)                                                                                                                                         |                                                                     |        |  |
| Date of Birth:                                                                                                                                                                                                   | Sex:<br><input type="checkbox"/> Dog <input type="checkbox"/> Bitch |        |  |
| Name of actual owner(s):                                                                                                                                                                                         |                                                                     |        |  |
| Address:                                                                                                                                                                                                         |                                                                     | Phone: |  |
| City:                                                                                                                                                                                                            | State:                                                              | Zip:   |  |
| E-mail                                                                                                                                                                                                           | (Optional) Region of Residence:                                     |        |  |
| Emergency Contact Name and Phone (Optional)                                                                                                                                                                      |                                                                     |        |  |
| <input type="checkbox"/> Check if this is a first-time entry, a copy of the official Registration of this hound must accompany this entry. (i.e., AKC Registration form, PAL registration, Canine Partner, etc.) |                                                                     |        |  |
| <input type="checkbox"/> Check if any information has changed since the last ASFA trial entry. Regarding _____                                                                                                   |                                                                     |        |  |

I CERTIFY that I am the actual owner of this 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 and the opportunity to have this dog judged and to win prize money, ribbons, or trophies, I (we) agree to abide by the rules and regulations of the American Sighthound Field Association in effect at the time of this lure field trial, and by any additional rules and regulations appearing in the premium list for this lure field trial. I (we) agree that the club holding this lure field trial has the right to refuse this entry for cause, which the club shall deem to be sufficient. I (we) agree to hold this club, its members, directors, governors, officers, agents or other functionaries, any employees of the aforementioned parties and the owner(s) of the trial premises or grounds 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 upon the lure field trial 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 loss of this dog by disappearance, theft damage or injury be caused or alleged to be caused by the negligence of the club or any of the aforementioned parties or by the negligence of any person or any other cause or causes. I (we) certify and represent that the dog entered is not a hazard to person or other dogs. This entry is submitted for acceptance of the forgoing representations and agreements.

SIGNATURE of owner or his agent  
duly authorized to make this entry \_\_\_\_\_

Please separate the entries before submitting to FTS.

OFFICIALAMERICAN SIGHTHOUND FIELD ASSOCIATION  
Request for ASFA Lure Chasing Instinct Registration Number

Fee Paid \_\_\_\_\_ This form is for dogs without any registration number from another registering body.  
Please print legibly.

|                                                                                                                                                         |                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|
| Breed:                                                                                                                                                  | Call Name:                                                          |
| Registered Name of Dog:                                                                                                                                 |                                                                     |
| FTS will circle Size after wicketingat Inspection:<br><b>Size Small:</b> up to 17½ inches(or <b>brachycephalic</b> ) <b>Size Large:</b> over 17½ inches |                                                                     |
| Registration Number:<br>(please write in registering<br>body before number)                                                                             |                                                                     |
| Date of<br>Birth:                                                                                                                                       | Sex:<br><input type="checkbox"/> Dog <input type="checkbox"/> Bitch |
| Name of actual owner(s):                                                                                                                                |                                                                     |
| Address:                                                                                                                                                | Phone:                                                              |
| City:                                                                                                                                                   | State: Zip:                                                         |
| E-mail                                                                                                                                                  | Region of Residence: (Optional)                                     |
| Emergency Contact Name and Phone                                                                                                                        |                                                                     |

This top portion is to be submitted with the \$10 fee to the Field Trial Secretary. First time trial entry on separate form.

\* \* \* \* \*

\_\_\_\_\_ was entered in the \_\_\_\_\_  
(Dog's Name) (ASFA Club Name)

ASFA trial held on \_\_\_\_\_. The dog was wicketedat inspection and is  
(Date)  
registered as Size **SMALL** **LARGE**.

The fee of \$10 was received by the FTS andsubmitted to the ASFA Records Coordinator.

\_\_\_\_\_  
Printed name of Field Trial Secretary

\_\_\_\_\_  
Signature of Field Trial Secretary

(Owner is to retain this receipt as proof of registration until notified by the ASFA.)

OFFICIALAMERICAN SIGHTHOUND FIELD ASSOCIATION  
Request for ASFA Lure Chasing Instinct Registration Number

Fee Paid \_\_\_\_\_ This form is for dogs without any registration number from another registering body.  
Please print legibly.

|                                                                                                                                                         |                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|
| Breed:                                                                                                                                                  | Call Name:                                                          |
| Registered Name of Dog:                                                                                                                                 |                                                                     |
| FTS will circle Size after wicketingat Inspection:<br><b>Size Small:</b> up to 17½ inches(or <b>brachycephalic</b> ) <b>Size Large:</b> over 17½ inches |                                                                     |
| Registration Number:<br>(please write in registering<br>body before number)                                                                             |                                                                     |
| Date of<br>Birth:                                                                                                                                       | Sex:<br><input type="checkbox"/> Dog <input type="checkbox"/> Bitch |
| Name of actual owner(s):                                                                                                                                |                                                                     |
| Address:                                                                                                                                                | Phone:                                                              |
| City:                                                                                                                                                   | State: Zip:                                                         |
| E-mail                                                                                                                                                  | Region of Residence: (Optional)                                     |
| Emergency Contact Name and Phone                                                                                                                        |                                                                     |

This top portion is to be submitted with the \$10 fee to the Field Trial Secretary. First time trial entry on separate form.

\* \* \* \* \*

\_\_\_\_\_ was entered in the \_\_\_\_\_  
(Dog's Name) (ASFA Club Name)

ASFA trial held on \_\_\_\_\_. The dog was wicketed at inspection and is  
(Date)  
registered as Size **SMALL** **LARGE**.

The fee of \$10 was received by the FTS andsubmitted to the ASFA Records Coordinator.

\_\_\_\_\_  
Printed name of Field Trial Secretary

\_\_\_\_\_  
Signature of Field Trial Secretary

(Owner is to retain this receipt as proof of registration until notified by the ASFA.)