

**The Working Australian Shepherd Club of Nevada
Is Hosting A
Lynn Leach Herding Clinic**



To learn more about Lynn go to: <http://www.downriver.org>

Fri, Sat, Sun June 20th thru 22nd

Clinic fee for working with Lynn and your dog is \$375 for all three days.

Single day clinic is \$150.

Auditing only (no individual work or dog) is \$30 daily.

All include lunch if you are pre-entered.

If you would like a lunch menu or have allergies, email Terri Jones, justintyme1999@hotmail.com.

Private lessons will also be offered on June 18th & 19th for a fee of \$65 for a ½ hour lesson.

Send entry and fees to: Sandy Moore P.O. Box 13 Gardnerville, NV 89410.

Make checks to WASCON. Clinic entries open April 10th, closing date for pre-entries is June 11th.

Only postmarked envelopes accepted for clinic entries, private lessons may be hand delivered.

Day of clinic entries will be accepted for Clinic or Auditing if space is available.

Refunds will be made only if there is a waiting list.

For more information go to www.wascon.net

Overnight and camping available – contact Sue Haase 775-721-8358 or suehh@charter.net

Dog friendly Motels in area:

[Quality Inn & Suites](#) Merchant verified (775) 782-7766 1795 Ironwood Dr, Minden, NV

[Historian Inn](#) (775) 392-2400 1427 Us Highway 395 N, Gardnerville, NV

[Westerner Motel](#) (775) 782-3602 1353 Us Highway 395 N, Gardnerville, NV

ENTRY FORM
LYNN LEACH HERDING CLINIC
& PRIVATE LESSONS

To be held at the ¾ Circle Ranch
1350 Dresslerville Road
Gardnerville, Nevada 89460

Clinic: Fri, Sat, Sun, June 20th thru, 22nd
Private Lessons: Wed. & Thurs. June 18th and 19th

Send entry and fees to: Sandy Moore P.O. Box 13 Gardnerville, NV 89410.
Make checks to WASCON. Clinic entries open April 10th

Please **CIRCLE** which you are entering;

CLINIC:

All 3 days - \$375.

Single Days- \$150. Each
Fri. Sat. Sun.

Auditing- \$30. Each
Fri. Sat. Sun.

PRIVATE LESSONS:

\$65. each

Wed.

Thurs.

Amount enclosed _____

Your Name: _____

Address: _____

Email: _____

Describe your prior herding experience: _____

About My Dogs: (multiple dogs may be entered in the clinic in working spots).

Name of Dog: _____

Breed of Dog: _____

Describe your dog's level of experience working stock:

Goals with this dog: _____

Contact: Sandy Moore, sheepcamp1@hotmail.com, (775) 781-5946.