

Alaska Dog Musher's Association
2008 GCI Open North American Entry Form

Driver: _____

Are you a current member? If not, please pay \$25 membership fee and fill out blue address card.

SSN: _____

(Legal requirement, must be on file in order to pay you any winnings.)

Be sure to include a current photo that can be used with press releases and on the ADMA website

Mailing Address: _____

Include zip or postal code so we can mail you winnings!

I am paying for: (circle appropriate items)

Total amount due: \$ _____

Entry fee = \$390

I agree that my signature on this entry form constitutes a waiver of all rights to hold the Alaska Dog Musher's Association, Inc. responsible in the event of accident or injury to myself, handlers, spectators or dogs.

ADMA membership = \$25

Additional banquet tickets = _____ @ \$35 each

I further agree to allow ADMA to use my image for promotional purposes.

Drug Testing Declaration/Agreement

I have read the Alaska Dog Musher's Association (ADMA) drug rules and procedures and agree to follow them during this race.

I understand that selected teams will be drug tested. Random draws will be conducted by members of the ADMA Drug Committee in the presence of the Race Marshal and shall be announced at check-in for the day's race. Adequate urine samples from dogs selected by the veterinarian from each chosen team will be required prior to the race. The Race Marshal may also request testing of any dog team, including blood testing, after the race. To facilitate sampling, I agree not to remove any dogs from their dog boxes after arriving at the track and prior to official check-in. If my team is selected for testing, I will not remove dogs until arrival of the veterinarian.

I also agree, should any of my dogs test positive for unpermitted drugs or substances, that my sole remedy shall be through ADMA specified procedures, including confirmation testing.

Signature of Driver _____ Date _____ Witnessed By _____

I declare that, to the best of my knowledge, the following medications (including injected vitamins, topical ointments, antibiotics, parasiticides, and other drugs or treatments) are the only medications that my proposed team has received during the 2007/08 race season. I understand that this list will only be used to assist the laboratory, race veterinarian, and drug committee in interpreting drug test results, and that drug use contrary to the ADMA Drug Rule will be determined based on actual laboratory test results from samples collected before and/or immediately following the race.

Dog's Name _____ Medication _____ Approximate Dates _____

(use reverse side for additional declarations if necessary.)

