

**ROCKY MOUNTAIN VIZSLA CLUB REGIONAL CHAMPIONSHIP AND FIELD TRIAL**  
**AKC LICENSED EVENT NO. 2026661112 and 2026661109**  
**AKC Member Trial – Flexible Format Trial**



**Wednesday October 14 - Thursday, October 15, 2026 - Rocky Mountain Regional All Breed Championship**  
**Friday to Sunday, October 16-18, 2026 - Horseback Field Trial**

Ohr's Ranch  
13999 County Road 7, Lindon, CO 80740

The RMVC is sponsoring two events. Wednesday - Thursday is a one-hour horseback stake with the winner being awarded the new AKC title of Regional Champion. Friday to Sunday is a horseback field trial. See below for stakes. All stakes open to all AKC Registrable Pointing Breeds. Bitches in heat are eligible for entry in the last stake of the day.

This Field Trial is held under the rules and procedures of the American Kennel Club.

**Entries close on Monday, October 12th at 5:00 PM**, or when the limit of entered dogs that can be run during daylight hours is reached. Entries accompanying the last entry may be accepted. Drawing will be held on October 12th at 5:30 PM at 1425 Excelsior Creek Avenue, Montrose, CO 81401.

**Please note: There will be a hunt test on adjacent grounds on Saturday and Sunday. The groups will be sharing the parking area. Therefore, if you have an RV, LQ or horse trailer, please check in with Mick or Liz prior to setting up to ensure we are best utilizing all of the available space. \$10 camping fee per rig per night.**

**We're using perfdog.com to accept all entries. Enter online and pay with a credit card or mail entry forms with a check payable to:**

**PerfDog**  
**539 W. Commerce St. #560, Dallas, Texas 75208**

**The Regional Championship is a separate event from the horseback field trial. You must register under each event in PerfDog.**

### STAKES, SCHEDULE, ENTRY FEES AND JUDGES

|                                                                                                                    |                                                  |                           |                                                            |
|--------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|---------------------------|------------------------------------------------------------|
| <b>Rocky Mountain Regional All Breed Championship<br/>(10/14-15)</b><br><b>Regional Grand Open Limited Gun Dog</b> | <b>Schedule</b><br>07:00 AM, 10/14<br>(Course 1) | <b>Entry Fee</b><br>\$150 | <b>Judges</b><br>Eric Cook (ZD174)<br>John Bonner (102537) |
|--------------------------------------------------------------------------------------------------------------------|--------------------------------------------------|---------------------------|------------------------------------------------------------|

**\*\*\* WINNER WILL BE AWARDED THE NEW AKC TITLE OF REGIONAL CHAMPION\*\*\***

| Horseback Field Trial<br>(10/16-10/18) | Schedule                        | Entry Fee | Judges                                          |
|----------------------------------------|---------------------------------|-----------|-------------------------------------------------|
| <b>Open All Age</b>                    | Fri 10/16 at 7:00 AM (Course 2) | \$65      | Brooke Flavin (109367)<br>Janice Branam (95418) |
| <b>Open Gun Dog (Ret.)</b>             | To follow OAA (Course 3)        | \$65      | Keith Bryant (92116)<br>Brooke Flavin (109367)  |
| <b>Amateur Gun Dog (Ret.)</b>          | To follow OGD Ret. (Course 3)   | \$65      | Wayne Cowles (97900)<br>Aaron Davis (91422)     |
| <b>Amateur Walking Puppy</b>           | To follow OGD Ret. (Course 4)   | \$45      | Aaron Davis (91422)<br>Keith Bryant (92116)     |
| <b>Amateur Walking Derby</b>           | To follow AWP (Course 4)        | \$55      | Janice Branam (95418)<br>Keith Bryant (92116)   |
| <b>Open Limited Gun Dog</b>            | To follow AWD (Course 3)        | \$65      | Aaron Davis (91422)<br>Wayne Cowles (97900)     |
| <b>Open Puppy</b>                      | To follow OLGD (Course 4)       | \$45      | Jeff Hoskins (Z8271)<br>Bridget McAslan (51968) |
| <b>Open Derby</b>                      | To follow OP (Course 4)         | \$55      | Wayne Cowles (97900)<br>Aaron Davis (91422)     |
| <b>Amateur Limited Gun Dog</b>         | To follow AWD (Course 3)        | \$65      | Jeff Hoskins (Z8271)<br>Bridget McAslan (51968) |

This trial is being run under the flexible format option. The field trial committee reserves the right to rearrange the running order of the stakes and add/rearrange judges should conditions warrant.

- The FT Secretary must be notified a bitch has come into season at least one-half hour prior to the beginning of the stake in which the bitch is entered. The running order will be modified so that the bitch(es) in season will run in the last brace(es) for that day. • Shotguns with blank shells will not be permitted.
- AKC approved tracking collars may be used in all stakes per AKC regulations. A list of approved models are listed at: <http://www.akc.org/trackingdevices/>.
- Entry fees include a processing fee. Entries may be cancelled or changed online prior to the closing date, with refunds (less the Processing Fee per entry) available to keep as PerfDog credit, refund to credit card, or mail via check (less a \$3 Check Fee). Entries and extras may be cancelled online after the closing date, but no refunds will be given.

### **STAKE AND EVENT LIMITS**

Entries are limited to the number of dogs that can be run during daylight hours.

### **COURSES AND BIRDS – BOTH EVENTS**

Courses without bird field. No birds and no firing of blank cartridges in puppy stakes. Derby stakes 20 minutes. Puppy stakes 15 minutes. Gun Dog stakes 30 minutes. Grand stake 60 minutes. Call backs for retrieving stakes. Quail, Chukar and/or Pheasant will be released in all stakes except Open Puppy.

### **PRIZES**

Rocky Mountain Regional All Breed Championship - trophy for Champion, rosettes 1st through 4th  
Field Trial - rosettes will be awarded to all placing dogs in each stake

### **OFFICERS**

President: Aaron Davis - Strasburg, CO  
Vice President: Mike Dieltz - Castle Rock, CO  
Secretary: Janice Branam - Boulder, CO  
Treasurer: Carol Ann McConville - Arvada, CO

### **FIELD TRIAL COMMITTEE**

Chairperson: Mick Cheshire, [cowboyvin@outlook.com](mailto:cowboyvin@outlook.com), 719-650-2510

Secretary: Liz Lorimer, [Liz.d.lorimer@gmail.com](mailto:Liz.d.lorimer@gmail.com), 914-490-1718

Members: Mike Dieltz, Josh Nieman, Mikael Lorimer

Field Trial Marshal: RMVC Club Members

Captain of Guns: RMVC Club Members

### **TRIAL GROUNDS AND FACILITIES**

- RV camping/horse trailer parking is available. No hookups. **Ohr's Ranch will be charging \$10 per night per rig for overnight camping. Please pay at the event with a check payable to RMVC.**
- If you have an RV, LQ or horse trailer, please check in with Mick or Liz before parking and unloading.
- There will be hydrants on site to fill tubs with water.
- Dogs are not permitted to be off leash except during the running of their brace.
- Please bring water for yourself and your dog.
- The Rocky Mountain Vizsla Club, any of its members, or the owners of Ohr's Ranch will not be held liable for any damage or injury to participants, their horses, dogs, vehicles, trailers and any other personal equipment.
- Please clean up after your dogs, spread horse manure, and fill any holes created by dogs and horses. Please remember we are guests of Ohr's Ranch.

### **MEALS**

The RMVC will sponsor dinner on Saturday night. Lunch will be provided for judges.

### **EMERGENCY INFORMATION**

Call 911 for all emergency needs requiring police, ambulance or fire.

### **VETERINARY CARE**

1. Strasburg Veterinary Clinic, (303) 622-4415, 56151 East Colfax Avenue, Strasburg, CO 80136
2. The Musketeers Veterinary Practice, (303) 644-4687, 550 E Colfax Ave, Unit A, Bennett, CO 80102
3. Living Springs Veterinary Care, (303) 644-3337, 820 Sharis Ct, Bennett, CO 80102

### **MEDICAL SERVICES**

1. Lincoln Health Limon Clinic, (719) 743-2421, 2110 Sixth Street, Limon, CO 80828
2. Lincoln Health Community Hospital, (719) 743-2421, 111 6th St, Hugo, CO 80821

### **HOTELS**

There are many lodging options in Limon, Colorado.

### **DIRECTIONS TO TRIAL GROUNDS**

From Highway 36 and 71 (Last Chance, CO): Go south on Hwy 71 for approximately 5 miles, turn left (east) on County Road 7 for approximately 8 miles, turn left (north) on County Road Q, which is the entrance to the trial area (Ohr Ranch)

From Limon: Go north on Hwy 71 for approximately 31 miles, turn right (east) on County Road 7 for approximately 8 miles, turn left (north) on County Road Q, which is the entrance to the trial area (Ohr Ranch)

### OFFICIAL AMERICAN KENNEL CLUB FIELD TRIAL ENTRY FORM

**Rocky Mountain Vizsla Club, Inc. October 14-15, 2026**

Location: **Ohr's Ranch** - 13999 County Road 7, Lindon, CO 80740 Event Type: **Field Trial – Regional Championship**  
Event Number: **2024661112**

Enter in Stake: Grand OLGD I enclose entry fees in the amount of: \$150

Breed:

AKC Reg. #: Sex:

Date of Birth:

AKC Litter # ILP # Foreign # & List Country: \_\_\_\_\_

Full Name of Dog: Call Name:

Sire:

Dam:

Name of Breeder:

Actual Owner(s):

Owner's Address:

City: State: Zip:

Name of Owner's Agent/Handler:

Handler's Address:

City: State: Zip:

AKC Rules, Regulations, Policies and Guidelines are available on the American Kennel Club web site: [www.akc.org](http://www.akc.org)

#### AGREEMENT

I (we) agree that the club holding this event has the right to refuse this entry for cause which the club shall deem sufficient. In consideration of the acceptance of this entry and of the holding of this event and of the opportunity to have the dog judged and to win prizes, ribbons, or trophies, I (we) agree to hold the AKC, the event-giving club, their members, directors, governors, officers, agents, superintendents or event secretary and the owner and/or lessor of the premises and any provider of services that are necessary to hold this event and any employees or volunteers of the aforementioned parties, and any AKC approved judge, judging at this event, 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 about the event 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 for loss, injury or damage to this dog. Additionally, I (we) hereby assume the sole responsibility for and agree to indemnify, defend and save the aforementioned parties harmless from any and all loss and expense (including legal fees) by reason of the liability imposed by law upon any of the aforementioned parties for damage because of bodily injuries, including death at any time resulting there from, sustained by any person or persons, including myself (ourselves), or on account of damage to property, arising out of or in consequence of my (our) participation in this event, however such, injuries, death or property damage may be caused, and whether or not the same may have been caused or may be alleged to have been caused by the negligence of the aforementioned parties or any of their employees, agents, or any other persons I **(WE) AGREE THAT ANY CAUSE OF ACTION, CONTROVERSY OR CLAIM ARISING OUT OF OR RELATED TO THE ENTRY, EXHIBITION OR ATTENDANCE AT THE EVENT BETWEEN THE AKC AND MYSELF (OURSELVES) OR AS TO THE CONSTRUCTION, INTERPRETATION AND EFFECT OF THIS AGREEMENT SHALL BE SETTLED BY ARBITRATION PURSUANT TO THE APPLICABLE RULES OF THE AMERICAN ARBITRATION ASSOCIATION. HOWEVER, PRIOR TO ARBITRATION ALL APPLICABLE AKC BYLAWS, RULES, REGULATIONS AND PROCEDURES MUST FIRST BE FOLLOWED AS SET FORTH IN THE AKC CHARTER AND BYLAWS, RULES REGULATIONS, PUBLISHED POLICIES AND GUIDELINES.**

Signature of owner or his

Agent duly authorized to make this entry: \_\_\_\_\_

|            |                |
|------------|----------------|
| Telephone: | Email address: |
|------------|----------------|

## OFFICIAL AMERICAN KENNEL CLUB FIELD TRIAL ENTRY FORM

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| <b>Rocky Mountain Vizsla Club, Inc.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |             | <b>October 16-18, 2026</b>                                        |                |
| Location: <b>Ohr's Ranch</b> - 13999 County Road 7, Lindon, CO 80740                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |             | Event Type: <b>Field Trial</b><br>Event Number: <b>2024661109</b> |                |
| Enter in Stake:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |             | I enclose entry fees in the amount of: \$ _____                   |                |
| Breed:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | AKC Reg. #: | Sex:                                                              | Date of Birth: |
| AKC Litter # ILP # Foreign # & List Country: _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |             |                                                                   |                |
| Full Name of Dog: Call Name:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |             |                                                                   |                |
| Sire:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |             |                                                                   |                |
| Dam:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |             |                                                                   |                |
| Name of Breeder:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |             |                                                                   |                |
| Actual Owner(s):                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |             |                                                                   |                |
| Owner's Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |             |                                                                   |                |
| City: State: Zip:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |             |                                                                   |                |
| Name of Owner's Agent/Handler:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |             |                                                                   |                |
| Handler's Address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |             |                                                                   |                |
| City: State: Zip:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |             |                                                                   |                |
| <p style="text-align: center;">AKC Rules, Regulations, Policies and Guidelines are available on the American Kennel Club web site: <a href="http://www.akc.org">www.akc.org</a></p> <p><b>AGREEMENT</b></p> <p>I (we) agree that the club holding this event has the right to refuse this entry for cause which the club shall deem sufficient. In consideration of the acceptance of this entry and of the holding of this event and of the opportunity to have the dog judged and to win prizes, ribbons, or trophies, I (we) agree to hold the AKC, the event-giving club, their members, directors, governors, officers, agents, superintendents or event secretary and the owner and/or lessor of the premises and any provider of services that are necessary to hold this event and any employees or volunteers of the aforementioned parties, and any AKC approved judge, judging at this event, 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 about the event 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 for loss, injury or damage to this dog. Additionally, I (we) hereby assume the sole responsibility for and agree to indemnify, defend and save the aforementioned parties harmless from any and all loss and expense (including legal fees) by reason of the liability imposed by law upon any of the aforementioned parties for damage because of bodily injuries, including death at any time resulting there from, sustained by any person or persons, including myself (ourselves), or on account of damage to property, arising out of or in consequence of my (our) participation in this event, however such, injuries, death or property damage may be caused, and whether or not the same may have been caused or may be alleged to have been caused by the negligence of the aforementioned parties or any of their employees, agents, or any other persons I <b>(WE) AGREE THAT ANY CAUSE OF ACTION, CONTROVERSY OR CLAIM ARISING OUT OF OR RELATED TO THE ENTRY, EXHIBITION OR ATTENDANCE AT THE EVENT BETWEEN THE AKC AND MYSELF (OURSELVES) OR AS TO THE CONSTRUCTION, INTERPRETATION AND EFFECT OF THIS AGREEMENT SHALL BE SETTLED BY ARBITRATION PURSUANT TO THE APPLICABLE RULES OF THE AMERICAN ARBITRATION ASSOCIATION. HOWEVER, PRIOR TO ARBITRATION ALL APPLICABLE AKC BYLAWS, RULES, REGULATIONS AND PROCEDURES MUST FIRST BE FOLLOWED AS SET FORTH IN THE AKC CHARTER AND BYLAWS, RULES REGULATIONS, PUBLISHED POLICIES AND GUIDELINES.</b></p> |             |                                                                   |                |
| Signature of owner or his<br>Agent duly authorized to make this entry: _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |             |                                                                   |                |
| Telephone: Email address:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |             |                                                                   |                |