

# SPRING 2024 - PATRICK SHANNAHAN CLINIC

**Friday and Saturday, April 26-27, 2024**  
**Dwight French Copus Cove Arena, 1731 E 3900 N, Buhl, ID**  
**STARTING TIME 9:00 A.M. EACH DAY**

The Eastern Idaho Stock Dog Association is proud to once again bring the 2010 National Sheepdog Champion, Patrick Shannahan, to our area for a stock dog handling clinic. Patrick is an internationally known handler, clinician, and judge. He trials extensively and in addition to the 2010 championship, has also won reserve National Sheepdog titles. In 2005 he was chosen to be on the team representing the United States at the World Trial. Patrick brings a wealth of knowledge to his clinics. He has experience with all breeds of stock dogs as well as a working knowledge of all classes of stock. His instructions are easy to follow and understand and he will help bring out the best in you, and your dog. All levels of dogs and handlers are welcome. If you have questions, please contact Lonna Jean Conroy, [ljonroy48@gmail.com](mailto:ljonroy48@gmail.com), 208-251-2456.

**FEES:** \$350/dog for first dog (includes 2024 individual dues of \$25), \$325 for each dog thereafter. Handler fees cover lunch for both days of the clinic. The Clinic is limited to 15 dogs (first paid/first in). No limit on auditors.

**Audit fees:** Club members who have paid 2024 dues, \$15/day. Non-members, \$25.00/day or \$40.00 for the weekend. Auditors may pay a \$15 fee to cover lunch each day or bring their own lunch.

You must be preregistered and have all club fees paid to hold a slot for a dog. Please make checks payable to E.I.S.D.A. and mail to Club Treasurer, Lonna Jean Conroy, 3470 S. Marsh Ck. Rd., McCammon, Idaho 83250. Venue directions and rules will be emailed to registrants.

**Cancellation policy:** Once you have paid into the clinic there will be no refunds. If for any reason you are unable to attend, you may sell your spot to someone else. Please notify Lonna Jean if you sell your spot or to inquire about a waiting list.

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## ENTRY FORM

Handler's Name: \_\_\_\_\_ Name of Dog(s): \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Breed of Dog(s): \_\_\_\_\_

Experience of Dog: Novice: \_\_\_\_\_ Intermediate: \_\_\_\_\_ Advanced: \_\_\_\_\_

**Auditors:** 1<sup>ST</sup> Day: \_\_\_\_\_ 2<sup>ND</sup> Day: \_\_\_\_\_ Both Days: \_\_\_\_\_ As an auditor, I wish to purchase lunch \_\_\_\_\_

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I do hereby agree to observe all venue ground rules. In the event of injury to me or my dog, I will not hold responsible the owner(s) of property, employees, sponsors of the clinic, helpers, or the clinician. I also agree to pay for any damage to livestock or property caused by me or my dog(s) during the clinic. (Vet bill, if applicable, or \$250 to replace an animal.) I acknowledge that sheep will be brought into the working area by the stock owner or her designated helper and I will not help or interfere in this process unless specifically requested to assist by the stock owner.

**SIGNED** \_\_\_\_\_ **date** \_\_\_\_\_