

Oregon Sheepdog Society
Request for Trial, Clinic and/or Sheep Liability Insurance-2008
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Location of Property to be used: _____

Exact Area of Property to be used _____

Location of Additional Property to be used _____

Exact Location of Additional Property to be used _____

Exact Times and Dates this Property will be used _____

Make checks payable to: OSDS

Send forms and checks to: Donna Grimes
P.O. Box 679
Athena, Or. 97813-0679
(541)566-3925 djgrimes@uci.net