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Calgary Associated Dog Fanciers' OFA/CERF EYE CLINIC

April 17th and 18th 2021

Register online or mail to: CADF Clinic c/o Kimmi Curley Box 2 Site 5 RR6 Calgary, Alberta T2M 4L5



OFA EYE CLINIC – examiner – Dr. Bianca Bauer, DVM, ACVO Okanagan Animal Eye Care - Kelowna, British Columbia

Inglewood Community Center (Skate Shack), 1740 24th Ave SE

Organizer – Kimmi Curley – kim.d.lachance@gmail.com

DEADLINE for applications – April 10th 2021

COST: CADF Breeders Registry Members – OFA/ECR Exam \$30.00 per dog OFA and Glaucoma - \$65.00 per dog

OFA FEES NOT INCLUDED

Non – members

Glaucoma

OFA Exam \$50.00 per dog

OFA and Glaucoma - \$85.00 per dog

CADF Clinic Application – Photocopy as many forms as you need. Please print clearly or type. Please include ALL requested information. Choice - Saturday (extended hours) Sunday (morning) Owner's Name:

Address:

City:

Province:

Pestal Code:

Telephone – home

Telephone – work Dogs' Registered Name Call Name: Breed: Colour _____ Tattoo/Chip: _____ Registration # ____ Sex M F Birth date d/m/y _____ Dogs' Registered Name Call Name: Breed: Colour _____ Tattoo/Chip:_____ Registration # _____ Sex M F Birth date d/m/y _____ Amount Enclosed Amount Enclosed \$30.00 per dog/breeders registry member **OFA/ECR Exam** \$50.00 per dog/non member OFA/ECR and \$65.00 per dog/breeders registry member

\$85.00 per dog/non member

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Calgary Associated Dog Fanciers' OFA HEART CLINIC

April 17th and 18th 2021

Register online or mail to: CADF Clinic c/o Kimmi Curley Box 2 Site 5 RR6 Calgary, Alberta T2M 4L5



OFA HEART CLINIC – examiner – Dr. Kim Hawkes DVM, DACVIM Pulse Veterinary - Edmonton, Alberta.

Inglewood Community Center (Skate Shack), 1740 24th Ave SE Organizer – Kimmi Curley – kim.d.lachance@gmail.com

DEADLINE for applications – April 10th 2021

COST: CADF Breeders Registry Members — Auscultation \$45.00 per dog

Doppler Echocardiogram - \$255.00 per dog

OFA FEES NOT INCLUDED

Non — members Auscultation \$60.00 per dog

Doppler Echocardiogram - \$285.00 per dog

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Please include ALL requested information.

CADF Clinic Application – Photocopy as many forms as you need. Please print clearly or type.

Choice - Saturday (extended hours)
Sunday (morning)

Owner's Name:
E-mail address:

Address:
E-mail address:

City:
Province:
Postal Code:

Telephone - home
Telephone - work

City: Province: Postal Code:
Telephone – home Telephone – work

Dogs' Registered Name
Call Name: Breed:
Colour Tattoo/Chip:
Registration # Sex M F Birth date d/m/y

Dogs' Registered Name

Call Name: Breed:
Colour Tattoo/Chip:
Registration # Sex M F Birth date d/m/y ______

Test	Cost	Amount Enclosed
Auscultation	\$45.00 per dog/breeders registry member	
	\$60.00 per dog/non member	
Doppler	\$255.00 per dog/breeders registry member	
Echocardiogram	\$285.00 per dog/non member	