GOLDEN RETRIEVER CLUB OF SOUTH AUSTRALIA INC ALL BREEDS EYE CLINIC

FROM 12 Noon on SATURDAY 22 July 2017

MARSULA ROOM, DAVID ROCHE PARK, CROMWELL ROAD KILBURN SA 5084 with DR. TONY READ, VETERINARY EYE SPECIALIST

COST \$85.00 PER DOG including AVA Admin fee & GST

(Cost at Dr Read's rooms is \$132.00 per dog)

PROUDLY SPONSORED BY THE GOLDEN RETRIEVER CLUB OF SA INC. & DR TONY READ

ALL RESULTS ARE CONFIDENTIAL & ONLY KNOWN TO THE DOG'S OWNER & DR READ

FOR MULTIPLE DOGS, PLEASE USE A SEPARATE FORM FOR EACH DOG

IMPORTANT! PLEASE BRING PEDIGREE & PREVIOUS EYE CERTIFICATE TO THE CLINIC

| REGISTERED NAME OF DOG TO BE TESTED: | | | | Рет наме: | |
|--------------------------------------|----------------------|--|---------------|-----------|--|
| Breed: | REGISTRATION NO: | | SEX: | Sex: | |
| | | | D.o.B: | | |
| COLOUR OF DOG: | MICROCHIP/TATTOO NO: | | | | |
| | | | | | |
| NAME OF OWNER: | | | PHONE NUMBER: | | |
| | | | | | |
| Address: | | | | | |
| | | | | | |
| EMAIL ADDRESS: | | | | | |
| | | | | | |
| Name of regular veterinarian: | | | | | |
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Send booking form and your cheque payable to the Golden Retriever Club of South Australia Inc. to: Ms R. Amyot, 9 Opey Avenue, Hyde Park, SA 5061. Please include a stamped self-addressed envelope, or email address, for the notice of your appointment time to be returned to you.

OR

Direct Deposit to BSB 105-900, a/c 133016740, Golden Retriever Club of SA, with 'your surname EYES' as reference. Email scanned booking form and bank receipt to grcsa@ozemail.com.au or post both to address above, including a stamped self-addressed envelope or email address.

Phone enquiries to 8373 1708 (0403 159 990 on the day).

NO APPLICATIONS WILL BE ACCEPTED AFTER 19TH JULY