



Make a copy of your completed form so you'll have the directions and other information handy.

The Granite State Shetland Sheepdog Club

Presents:

All-Breed Eye Clinic with Dr. Ruth Marrion

Sunday, March 29, 2020

**MAD About Dogs Training Building
72 Hayes Road, Madbury, NH**



From the Lee traffic circle [routes 4 & 125] go north on rte. 125 for approx. 6/10 mi to right on Pinkham Rd; go to end of Pinkham Rd. and take a left; go approx. 1 mi to right on Hayes Rd; go approx. 1 mile to #72. Training building is beyond grey cape style house. Lots of parking!! Entrance on side...look for signs.

Avid® microchips, including convenient pre-paid registration, will be available

Pre-registration is required! Registrations and payments must be received by March 11th. Please circle/highlight the window of time you prefer for an appointment, **indicating your first & second choices**; we will make every effort to accommodate you. Unless you hear otherwise, your first choice time is accepted. If desired, you can receive appointment confirmation by emailing: clwebster@comcast.net.

Please arrive at least 20 minutes prior to your eye exam appointment so that eye drops can be administered. I will make every attempt to mail the exam forms to you prior to the clinic so you can fill them out in advance & bring them with you. If you do not receive your forms prior to the clinic, **you will need to have your dog's AKC registration & permanent ID information available to complete the forms prior to your appointment.** Submitting to OFA is not required; all will receive an exam form copy.

If you need to reach us during the eye clinic hours, PLEASE call Sue St. Louis' cell phone at: 603-512-1557 or Cynthia Webster's cell phone at: 603-425-4676.

Please complete the following information:

Owner Name: _____ Phone: _____

Address: _____

E-Mail: _____ Cell Phone: _____

Don't forget to let us know of any changes in your phone numbers, mailing or email addresses...thanks!

Dog's Call Name(s): _____

Breed(s): _____

Dogs for Eye Exam: _____ @ \$30.00/dog = \$ _____

Dogs for Microchip: _____ @ \$40.00/dog = \$ _____ This includes pre-paid registration.

Total due payable to **GSSSC**: \$ _____

Refunds will be issued only with 24 hour's notice of cancellation.

Please circle requested time slot noting 1st & 2nd choice:

9-10AM 10-11AM 11-Noon ----- 1-2PM 2-3PM

Send form with Payment to: Cynthia Webster - 11 Dubeau Dr - Derry, NH 03038

Questions? Contact me at (603) 432-6629 or clwebster@comcast.net