

The Granite State Shetland Sheepdog Club

Presents:

All-Breed Eye Clinic with Dr. Ruth Marrion

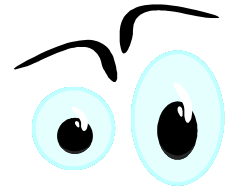
Sunday, April 1, 2012

Oyster River Veterinary Hospital

157 Calef Highway (Rte. 125) Lee, NH



www.gssscnh.com



One-fourth mile south of the Lee traffic circle on route 125. Look for the "EYE CLINIC" sign!

HomeAgain® microchips will also be available

Visit www.homeagain.com for product information

Pre-registration is required! Registrations and payments must be received by March 10th. Please circle 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 30 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 CERF forms prior to your appointment.** Submitting to CERF is not required; all will receive an exam form copy.

The ORVH is not open on Sundays. **If you need to reach us during the eye clinic hours only,** 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: _____

Address: _____

Phone: _____ E-Mail Address: _____ 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: _____ @ \$28.00/dog = \$ _____

Dogs for Microchip: _____ @ \$42.99/dog = \$ _____ This includes your basic HomeAgain® registration fee of \$17.99. We will take care of sending your registration to HomeAgain®.

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 Noon-1 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 - please do not call ORVH for information.