

The NZVA Elbow Dysplasia Scheme

Form for owners

Dog information

Please complete this form using BLOCK LETTERS

Microchip (required)		SIRE	
Name <i>If presenting a Dogs NZ registered dog, then the name must be the Dogs NZ registered name.</i>		Sire's registration number	
Registration number (Dogs NZ / Other)		DAM	
Date of birth	DD/MM/YYYY	DAM's registration number	
Breed		Paternal Grand Sire (PGS)	
Sex		Paternal Grand Dam (PGD)	
Colour / markings		Maternal Grand Sire (MGS)	
Tattoo (if present)		Maternal Grand Dam (MGD)	
Age (months) <i>Minimum age for scoring is 12 months</i>			

Owner's declaration

I hereby declare that:

1. The particulars above are correct and relate to the dog submitted for radiographic examination.
2. The dog examined is the animal described on this application
3. The dog has not previously been scored under any other elbow dysplasia scoring scheme.
4. I acknowledge these radiographs are the property of the veterinary practice detailed below.
5. I give permission for information in this certificate to be incorporated into international statistics and to be used in progeny testing data analysis.
6. I understand results may be used for the purpose of statistical analysis and scientific research, and for the statistical and scientific research to be published.

Name

Address

Signature

Date

Veterinarian's declaration

I hereby declare that I have scanned and verified the microchip and identity of this animal

Veterinarian's name

Practice

Signature

Date