## **Application for Clumber Spaniel cord 1 PRA DNA Test**

Registered N	ame of Dog / Bitch:				
Registration No:					
Date of Birth:		Male / Female?			
Desistered N	ama of Siva				
Registered N					
Has Sire been PRA tested?					
What	was the result?	*Clear / Carrier / Affected			
Registered N	ame of Dam:				
Has Dam been PRA tested?		? *Yes / No/ Don't know			
What	was the result?	*Clear / Carrier / Affected			
Has this dog	already sired / whelp	ed a litter?	*Yes / No	If yes how ma	any litters?
Has this dog	ever shown any sign	s of vision ir	mpairment?	*Yes / No/ Do	n't know
Contact deta	ils of owner:				
Name:					
Address:					
Tel:					
Email:					
Clumber Spa	niel Club Member?	*Yes / No	Membership	applied for?	*Yes / No
* Please dele	te as appropriate				
I / We agree t	o forward the result o	of this test to	the Clumber S	Spaniel Club	
Signed:					
Please send t	his application to the B	reed Health (	Coordinator:		
Carol Page or	health@clumberspanielclub.org.uk Micklemess, 20, Swanwick Lane, Swanwick, Southampton SO31 7HF				