## LABRADOR RETRIEVER CLUB OF MANITOBA EYE (CERF) CLINIC September 22 & 23, 2018

Dr. Lynne Sandmeyer, DVM, DVSC Dip. AVCO,

## Western College of Veterinary Medicine, University of Saskatchewan

Location of clinic: Pet Vet, Unit A, 25 PTH 52, Steinbach, Manitoba

Owner's Name			Co-owner			_
Address: Street and Code		City	Province or State		- Postal	
Dog's Registered Nam	ne					_
Breed			ID number color	Tattoo	Microchip	)
Registration Number	AKC	CKC	Other	-	Sex	
Date of Birth	(month-da	ny-year)				
Phone #	E-N	E-Mail Address				
Please indicate if you	red Time Slo u have also re times	egistered for coordinated.	N the HEART CLIN	No	Afternoont your appoi	
In order to hold you for each additional oboo	r appointm dog (same ro kings of 6 d	ent time, adv egistered ow logs or more	vance payment on ner) required. to the same regi	f \$40 for the 10% disco stered owne	e first dog p unt will be g er.	
Please make chequ		_	onal \$20 surcharge le to LRCM Mai			ent to

Group 327, RR#3 Selkirk MB R1A 2A8

\*\*\* Deadline: September 28, 2018 \*\*\*

For Further Info - Contact Carolynne @ 757-9397 or at c.l.p@qkstream.com

Carolynne Pitura, Box 63,