

Echocardiogram with Color Flow Doppler Breed Screen Clinic

Open To Purebred Registered Dogs of All Breeds

With Board-Certified Cardiologist, Dr. Luis Braz-Ruivo DVM, DVSc, ACVIM (Ca)

Dates: August 2, 3, & 4, 2019

Location: North American Ring Viewing Building Spruce Meadows, 18011 Spruce Meadows Way SW, Calgary, Alberta Sponsored by the Alberta Kennel Club All Breed Show

PLEASE NOTE: This clinic is being conducted for the screening of congenital or acquired heart disease in breeding stock. No medical advice will be given to treat any suspected medical condition, or to check the progression of a previously diagnosed condition.

Registration Deadline:

July 30, 2019 or when all spaces have filled

Echo Cost: \$235.00 per dog prior to/on the registration deadline. Contact Cindy or Karen regarding appointment availability after deadline.

* The price of the echocardiogram appointment does not include gate admission to the dog show. If you are not entered in the show, you will be required to pay the gate admission fee to get into the venue for your appointment. *

* Payment & registration through DogShow.ca! *

Other registration/payment options:

> Make cheques/money orders payable to: Luis Braz-Ruivo



Cindy Thomas / Karen LeJeune 219 - 5344 76 Street, Red Deer, AB. T4P 2A6 drluisbrazruivoab@gmail.com

Cindy's Phone: 403-346-9848 / Karen's Phone: 403-318-3358

Echocardiogram Clinic Registration Form

Appointments:

It is recommended to have an assistant available to take your dog to the scheduled appointment if you are unable to do so yourself due to any unexpected conflicts. Keep in mind that the assistant you choose will be privy to confidential information during your dog's exam. Any person with a large breed dog in the clinic MUST bring an assistant to the dog's appointment to assist in getting the dog on and off the cardiac table.

Registration:

There will be a charge of \$45.00 for all NSF cheques. There are no cancellations or refunds unless the clinic is cancelled. There will be no refunds given for missed appointments. Any overpayment will be considered a donation.

Please print clearly or type out the form below. Complete one registration form per dog and send with payment using one of the methods listed on previous page.

Is this dog entered in the dog show? _	_ Yes No (mandate	ory - please check one)	
Select all that apply: All Breed	Specialty Ob	edience Rally Obedience _	_ Agility
Class or Classes Entered?			
Registered Name of Dog:			
Registration Number (circle one: AKC	CKC Other):		
Date of Birth (D/M/Y):	Sex:	Breed of Dog:	
Owner(s):			
Address:			
City:	Province/State	: Postal/Zip	Code:
Home Phone:	Other Phone (circle one: work or cell):		
Email Address:			
Please indicate which day(s) and time(using 1 & 2):	(s) your dog will be av	ailable for an appointment (give u	s your top two choices by
Friday, August 2, 2019Saturday, August 3, 2019Sunday, August 4, 2019	morning	afternoon afternoon afternoon	
Appointments will be scheduled once the email address you provided above af	• • •	chedule is out. Your appointment d	ate and time will be sent to
Office Use Only:			
Appointment Date:	,	Appointment Time:	am/pm (circle one)
Gift Certificate(s) Redeemed: N / Y (ci	rcle one)	Total Amount of Gift Certificate	e(s) Redeemed: \$