

PASE EYE CLINIC – Jun 20/2020

Owner's Name _____

Address _____

City _____ Postal Code _____

Phone _____ email _____

Dog's Name _____

DOB- dd/mm/yy _____ Breed _____

Registration # _____

Microchip/tattoo _____ sex _____

Dog's Name _____

DOB- dd/mm/yy _____ Breed _____

Registration # _____

Microchip/tattoo _____ sex _____

\$40 per dog for first 4 dogs, Contact us for pricing on litters over 5

Send registrations to:

riskhopeaussies@sasktel.net or sheeps.kin@sasktel.net

or mail to

2101 Retallack St, Regina SK, S4T2K5

Pay by etransfer, cash or cheque. Payment must be received before appointment is given