

VIZSLA FUTURITY/MATURITY EVENT
LITTER NOMINATION FORM -- FEE \$30.00
(Litter must be nominated BEFORE it is whelped)

Litter Nominator: Check **all** that apply Breeder Owner Lessee (of the dam)

Address _____ City _____
State _____ Zip Code _____ Phone _____ E-Mail _____

Other principals: Co-Owner(s) Co-Breeder(s) Lessee of Dam (check **all** that apply)

Please add additional sheets if necessary

Address _____ City _____
State _____ Zip Code _____ Phone _____ E-Mail _____

Dam and Sire of Nominated Litter (both must be over TWO years old with DNA and OFA numbers)

DAM _____ **Call Name** _____

AKC Registration # _____ Date of Birth _____

DNA #: _____ OFA # _____

SIRE _____ **Call Name** _____

AKC Registration # _____ Date of Birth _____
(If from frozen semen without DNA so state)

DNA #: _____ OFA # _____

Owner of
Sire _____

Address _____ City _____

State _____ Zip Code _____ Phone _____ E-Mail _____

Co-Owner(s) of Sire (if any)

Address _____ City _____

State _____ Zip Code _____ Phone _____ E-Mail _____

DATES OF BREEDING _____ ESTIMATED WHELP DATE _____

This form together with \$30.00 check payable to VIZSLA FMP must be sent to:

Edwin Foster, 1157 Manor Drive Columbus, Ohio 43232 (614) 762-7006 E-Mail Address – maturity.futurity@gmail.com

I (we) acknowledge that the "Vizsla Futurity/Maturity Program Rules and Regulations" have been made available to me (us) and that I (we) are familiar with its contents and agree to be bound by these Rules and Regulations, as may be amended from time to time.

I (we) certify and represent that the information contained in this litter nomination is true and correct to the best of my (our) knowledge. This litter nomination is being submitted on the foregoing representation and agreement.

Signature _____ **Date** _____

FOR OFFICE USE ONLY: Postmark Date: _____

Date Received: _____ Fee Received: _____

Date Recorded: _____ Check No: _____

PLEASE PRINT CAREFULLY OR TYPE ALL INFORMATION