Application form consent coverage

(send completed to [fokcommissie@gmail.com](mailto:fokcommissie@gmail.com))

**Breeder ALAEU nr. EU-BR:**

**Kennel:**

|  |  |
| --- | --- |
| **Data female** |  |
| ALAEU nr |  |
| Full name female |  |
| Expected date of heat |  |
| Regarding your 1st – 2nd or 3rd litter |  |
| Are the results of the following medical exams in ZooEasy? |  |
| DNA profile |  |
| HD / PennHIP |  |
| ED |  |
| ECVO (max 1 jr old at time of mating) |  |
| Patella |  |
| PRA (female and/or male) |  |
| IC (female and/or male) |  |
| DM (female and/or male) |  |
| EIC (female and/or male) |  |
| Health Check form |  |

|  |  |
| --- | --- |
| **Data 1st choice male** |  |
| ALAEU nr |  |
| Full name |  |
| Are the results of the following medical exams in ZooEasy? |  |
| DNA profile |  |
| HD / PennHIP |  |
| ED |  |
| ECVO (max 1 jr old at time of mating) |  |
| Patella |  |
| PRA (female and/or male) |  |
| IC (female and/or male) |  |
| DM (female and/or male) |  |
| EIC (female and/or male) |  |
| Health Check form |  |
| COI (inbreeding) in test litter is less than 5% |  |

|  |  |
| --- | --- |
| **Gegevens 2e keuze reu** |  |
| ALAEU nr |  |
| Full name |  |
| Are the results of the following medical exams in ZooEasy? |  |
| DNA profile |  |
| HD / PennHIP |  |
| ED |  |
| ECVO (max 1 jr old at time of mating) |  |
| Patella |  |
| PRA (female and/or male) |  |
| IC (female and/or male) |  |
| DM (female and/or male) |  |
| EIC (female and/or male) |  |
| Health Check form |  |
| COI (inbreeding) in test litter is less than 5% |  |

|  |  |
| --- | --- |
| Who is your mentor (kennel/name mentor) |  |
| Is your mentor aware of this application? |  |

If the above questions are not completed and/or all test results are not in ZooEasy, unfortunately this application cannot be processed.