

PROGESTERONE TESTING BOOKING FORM

Name	Phone Number
Address	Post Code
Email	Vets Practice Name
Vets Practice Tel	Vets Practice Email
Veterinary Practice information may be used to retrieve or send medical history of the animal named below	
Bitch KC Name	Breed
Kennel Club Registered Yes No	Microchip No
Date of Birth	Colour
Country of Birth	Discipline/Use
I confirm that the dog named is not exempt to services as per the El	lite kennel Fertility ethical breeding policy <u>View the Policy HERE</u>
 I have arranged suitable insurance for the dog facility OR I do not require insurance cover for the Blood test (Please tick appropriate) 	whilst at the Progesterone testing/Blood Taking Taking/Progesterone
I confirm that I am the owner/authorised agent and and run a progesterone test.	give permission to take a blood sample from the dog named above
	from the blood sampling site of the dog stated above.
	Fertility Ltd prior to removal of the Dog and/or the semen samples entitled to retain possession of my property until I have paid al
 I agree that any photographs or videos taken while 	st a service is being provided Elite Kennel Fertility can use those
	nine a breeding schedule based on a single progesterone/cytology
responsible for obtaining insurance on my beha	all agreed by Elite Kennel Fertility Ltd in writing, it is no alf in respect of either the Stud Dog, Bitch or the Semen. correct in sections A, B, C and D and that I have read and usiness and agree to be legally bound by them.
SIGNED NAV	1E DATE
Owner/Agent BLO	CK CAPITALS nnelfertility.com
	Ash Lane, Whitchurch, Shropshire, SY13 4BP, UK
office@elitekennelfertility.com 01948 668059	Elite Kennel Fertility