

Application
Southern Colorado Kennel Club
Breeder Referrals

Breed _____

Name _____

Kennel Name _____

Address _____

Phone number _____

Email Address _____

Website _____

How long have you been breeding? _____

Other breeding experience? (Horses, Birds, Cats, Reptiles) _____

How many Litters do you produce a year? _____

Age at which you breed your bitches: _____

Breed Associations to which you belong _____

Health evaluations:

Penn Hip:__

OFA (Hip Dysplasia):__

CERF evaluation (eyes):__

PDP1:__

Heart:__

Other:_____

Please underline or highlight any information **NOT** to be put on the website