



German Shepherd Dog Club of Tasmania Inc.

Affiliated with the Dogs Tasmania (TAS. Canine Assoc Inc) & The German Shepherd Dog Council of Australia (GSDCA Inc)

HD & ED X-RAY CHECKLIST FOR OWNERS – PERSONAL USE

Dear Member

The following steps you through the process in requesting a contract and the HDED process

- Your dog must be 12 months or older
- Your dog must be microchipped
- Fill in contract application from (club website/HDED Administrator)
- Fill in contract application/registration/pedigree. Check that your name as owner is on the above document. *(If not you may need to transfer ownership. Contact breeder or TCA)*
- Direct Deposit is the preferred method of payment:
MYSTATE Account name: **GSDCT**
BSB: **807009**
Account Number: **51170999**

or **enclose** Cheque or Money Order for amount payable.
Enclose a **STAMPED, SELF - ADDRESSED BUSINESS SIZE ENVELOPE** or larger
for multiple dogs. **MINIMUM ENVELOPE SIZE 220mm x 110mm or larger**
- Post all of the above to HD/ED Administrator
- On receipt of the HD/ED contract, **THEN** arrange the X-Ray with your vet. You must sign the contract **BEFORE X-RAY** (in your presence) ensure that the veterinarian has read dog's tattoo/microchip and it corresponds with the contract. Vet to sign contract.
- Tattoo/microchip and name must be embedded in X-Ray
Collect & Check the contract, then post x-rays/copy of TCA Registration/pedigree, Contract and a stamped, self-addressed envelope to the Radiologist
- Receive back a pink copy of Hip/Elbow results sheet

Good Luck with your dog.

Please remember if you have any concerns with this process contact the HD Administrator.



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HD/ED Administrator - Mrs Heather Mathers, 8 Aldridge Court, AUSTINS FERRY TAS 7011
Phone: (03) 6249 8149. **Email:** shadowgsdd@bigpond.com

****PLEASE ALLOW 14 DAYS FOR DELIVERY OF CONTRACT****

Please forward ONE contract: Please tick appropriate section

..... **Hips & Elbows** **Hips Only** **Elbows Only**

DOG'S NAME

Microchip # TATTOO #

DOB: STATE REG No: SEX:

SIRE:

DAM:

OWNER/S NAME AND ADDRESS:

..... PHONE No.

EMAIL

Please indicate your preferred Radiologist by deleting the one **NOT** required

DR. LAVELLE YES

DR. RICHARDSON YES

Signature of owner/s Date/...../.....

***I enclose a stamped, self-addressed business size envelope. (If more than 1 dog then larger envelope) & copy of TCA or State registration/pedigree with a cheque / money order payable to G.S.D.C. of Tas. Inc.**

**COST: HIP & ELBOWS \$70.00
HIPS ONLY \$52.00
ELBOWS ONLY \$35.00**

For Office Use Only

Date Received: Tas No. Receipt No.....

Contract Sent Contract No. Result.....

ALL MEMBERS NOTE:



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- Once issued HD/ED contract is **NON TRANSFERABLE AND/OR REFUNDABLE**
- You will receive back a pink slip which will notify you of the pass/fail status of your dog's hips/elbows