



German Longhaired Pointer Club of North America

2011 SINGLE DOG REGISTRATION

GLPCNA Registration#: _____
<for office use only>

Date Dog Acquired: _____(MM/DD/YY)

Registered Name: _____

Call Name: _____ Date of Birth: ____/____/____ (Month/Day/Year)

Sex<circle one>: Male / Female Sterilized<circle one>? YES / NO

Color <circle one>: Brown Brown w/ white chest patch Brown Roan Dark Roan Light Roan

Tattoo Number: _____ Organization Registered with:_____

Other organization(s) registered with:

Registration Number: _____ Organization: _____

Registration Number: _____ Organization: _____

DNA Profile Number: _____DNA Lab: _____

Microchip Number: _____ Company: _____

Sire's Registered Name:_____

Registration#: _____Organization:_____

Dam's Registered Name: _____

Registration#: _____Organization:_____

Is Dog certified for breeding <circle one>? YES / NO If yes, include a copy of hunt test results, hip xray results and breed show results. If import a copy of proof of tattoo.

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