



Clumber Spaniel Club of America DNA Bank

Owner consent form

Owner Information	
Name:	
Address:	
City, State, Zip:	
Telephone:	Email:
Signature:	Date:

Your signature authorizes your submission of DNA samples from the dogs listed below to be included in the CSCA DNA bank, managed by the Clumber Spaniel Health Foundation. You understand and agree that samples submitted to the bank become the property of the CSCA, and agree to their use in approved research projects.

Registered and/or call name	Date of Birth	Sex (circle)	Spay/Neuter (yes/no)	Color	Registration Number
		M / F			
		M / F			
		M / F			
		M / F			

Health History/Additional Comments
