

PLEASE PRINT CAREFULLY OR TYPE ALL INFORMATION

Use this Form ONLY if the Vizsla was previously nominated into the Futurity Division

Rev 7/1/2015

VIZSLA FUTURITY/MATURITY PROGRAM

MATURITY NOMINATION FORM – LITTER REF. # _____

Puppy must be nominated before the age of six months for Maturity **

Puppy must have previously been nominated into the Futurity to use this form.

A separate form must be submitted for each dog nominated

Maturity Only (Nomination before six months) ~ Enclose \$20.00

**Maturity Only (Late Nomination over six months and before One Year of age) ~ Enclose \$70.00

Name of Nominator/Owner* or of the puppy _____

Address _____

City _____ State _____ Zip code _____ Telephone _____

E-Mail Address(Required) _____

If owner is not breeder provide:

Co-Owner(s) if any: _____;

Address _____

City _____ State _____ Zip Code _____ Telephone _____

E-Mail(Required) _____

Name of breeder _____; **E-Mail(Required)** _____

Address _____

City _____ State _____ Zip Code _____ Telephone _____

Name of Co-breeder _____; **E-Mail(Required)** _____

Address _____

City _____ State _____ Zip Code _____ Telephone _____

Owner of Sire: _____; **E-Mail(Required)** _____

Address _____

City _____ State _____ Zip Code _____ Telephone _____

Add additional sheet if a Co-owner of Sire exists.

*The Program Administrator should be notified, in writing, of any change in ownership or address of a Futurity/Maturity dog to maintain the accuracy of the database.

Full Registered Name of Futurity/Maturity Dog (Name must be entered if registration number is not available) _____
Call Name _____

AKC Litter Registration # _____ **AKC Registration #** _____

If AKC registration # is not available, a name MUST be provided or the nomination will be returned. Both name and Registration number must be received by the Program Administrator immediately upon receipt but no later than 15 days prior to the closing date of the Futurity/Maturity Event in which the dog will compete.

Date Whelped _____

Dog Bitch (Identify sex)

Name of Dam: _____ AKC Registration #: _____

Name of Sire: _____ AKC Registration #: _____

This form, together with a check payable to VIZSLA FMP for the fees indicated at the top of the form, must be sent to: VFMP C/O Edwin Foster, 6031 E. Main St., Suite 216, Columbus, Ohio 43213

*Utilizing the PayPal feature will increase the fee to \$22.00 and \$72.00, respectively. (visit website for paypal option)

I (we) acknowledge that the "Vizsla Futurity/Maturity Program Rules and Regulations" have been made available to me (us) and that I (we) are familiar with its contents and agree to be bound by these Rules and Regulations, as may be amended from time to time. I (we) certify and represent that the information contained in this litter nomination is true and correct to the best of my (our) knowledge. This litter nomination is being submitted on the foregoing representation and agreement.

Signature _____ **Date** _____

[Click here for help with signature](#)

Website: www.vizslafuturitymaturityprogram.com E-Mail Address – maturity.futurity@gmail.com