

## How to use this form.

First thing please update to the latest version of Adobe Reader, you can get it [here](#) free.

1. The manual method.
  - a. Open the form in Adobe Reader and in the tool bar select print to print a copy. Fill out the form with your favorite pen, find a copy machine, and make 2 copies. Mail 2 copies to the Futurity Chairman and keep one for your self. Don't forget to include your check.
2. A faster method.
  - a. Open the form in Adobe Reader and in the tool bar select the little hand icon. Move the little hand icon to the first field and click on it. Select an action or option from the list. Use the tab key to move to the next field. When you click on a text field the little hand will change to an I bar cursor, type the required text, your dogs name or other required information. After you have completed every field and checked the form for accuracy, go to the tool bar and select print. Print 3 copies, mail 2 to the Futurity Chairman with your check. Retain a copy for your records.
3. On the primary owner or breeder line list only **one** name, this is the individual that all Futurity material will go to. List co-owners on the line provided.
4. Please provide your Purina Pro Plan number in the space provided if you participate in that plan.
5. If you have questions drop me a note at [DCAFUT@ccwebster.net](mailto:DCAFUT@ccwebster.net)



# Dalmatian Club of America, Inc.

## Bitch Nomination Form

20\_\_\_\_ Futurity

Date \_\_\_\_\_

Name of Bitch \_\_\_\_\_ AKC No \_\_\_\_\_

Primary Owner or Lessee of Bitch \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone No [\_\_\_\_] \_\_\_\_\_ Email \_\_\_\_\_

Date of Breeding \_\_\_\_\_ DCA Member [Y/N] \_\_\_\_\_ Applying Member [Y/N] \_\_\_\_\_

Name of Co-Owner[s] \_\_\_\_\_ Purina Pro Number \_\_\_\_\_

Name of Sire \_\_\_\_\_ AKC No \_\_\_\_\_

Owner of Sire \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Owner of Sire is a DCA member [Y/N] \_\_\_\_\_ Litter was produced by artificial insemination [Y/N] \_\_\_\_\_

Enclosed \$ \_\_\_\_\_

\_\_\_\_\_  
Signature of Owner or Lessee

Fee \$20.00 U.S. Funds. Make checks payable to DCA.

Mail two copies of this form with fee to:

Steve Nielsen Futurity Chairman

17075 South Holcomb Road

Oregon City, OR 97045

[503]631-7775

[DCAFUT@ccwebster.net](mailto:DCAFUT@ccwebster.net)



\_\_\_\_\_  
Bitch Number \_\_\_\_\_

\_\_\_\_\_  
Date Received \_\_\_\_\_ Posted on \_\_\_\_\_