



GPCA Longevity Award Application



Please Type or Print (clearly) the following information and include copies of documentation:

Dog's Registered Name: (Including Titles)

Registry (AKC, CKC, FCI, etc):

Sire's Registered Name: (Including Titles)

Dam's Registered Name: (Including Titles)

COPY OF REGISTRATION OR OTHER PROOF OF DOB IS REQUIRED AND MUST BE SUBMITTED WITH APPLICATION

Date Of Birth: ____/____/____ (mm/dd/yy) Sex: Male Female

Date of Death: ____/____/____ (mm/dd/yy)

Cause of Death:

Spayed/Neutered: Yes No Age of Spay/Neuter: _____

Owner(s) Name:

Street Address:

City: _____ State: _____ Zip Code: _____ Country: _____

Telephone (Day): () _____ Evening () _____

Email Address: _____

Co-Owner(s) Name:

Street Address:

City: _____ State: _____ Zip Code: _____ Country: _____

Telephone (Day): () _____ Evening () _____

Email Address: _____

Breeder's Name:



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Instructions for submitting your application:

- Complete the entire form.
- Include copy of registration or other documentation as proof of date of birth.
- CONFIRMATION THAT COMPLETED HEALTH SURVEY HAS BEEN MAILED TO THE TABULATOR _____ (date mailed)
(Optional, but desirable for long dead Pyrs) Mail completed copy to the GPCA Health Survey Tabulator; address appears on the survey. To download and print a copy of the survey go to: www.gpcahealth.org
- Verification of the date of death or proof that the dog is still living is required and must be submitted with the application. This could include statements from your Veterinarian or a GPCA member in good standing (other than yourself, co-owners or breeders). This statement must also be included with the application. In the case of long dead dogs a memorial ad which indicated date of death may be acceptable.

Print and mail the completed application and copies of documentation to:

GPCA Longevity LC Program
Flo Laicher
286 Dixon Road
Carmel, NY 10512-9812

Email: pyrshire@comcast.net
Telephone: 845-225-2754