



## SPRING ALL BREED HEALTH CLINIC IN HONOR OF SARITA GELLMAN

Sponsored by the MID-JERSEY LABRADOR RETRIEVER CLUB, INC.

MAY 31<sup>st</sup>, 2026 -- 8:00 AM TO 1:00 PM

**Purrfurred Veterinary Care – 43 Kent Road, Howell, New Jersey 07731**

**EYES:** Michael J. Ringle, DVM, Diplomate ACVO, includes OFA/CERF form.  
\$50.00 Single / 3 or more \$40.00 each

**HEART:** Katie Pesce, VMD, Diplomate ACVIM (Cardiology)  
\$365.00 Echo & Auscultation / 2 or more \$350.00 each  
\$85.00 Auscultation only / 2 or more \$75.00 each

**PACKAGES:**

Eye and Echo \$390.00  
Eye and Auscultation \$100

**Notes:** OFA discount code information for reduced OFA submissions will be available at the clinic.

**BREEDING STOCK ONLY for ECHO's, NO** spayed, neutered, or dogs with existing conditions.  
AKC #, microchip # and full registered name **MUST** be provided before appointment will be scheduled.

**APPOINTMENTS:** By pre-registration only. Appointments are scheduled on a first-come/first-served basis, upon receipt of payment and the form below. Time preferences will be honored when possible.

**DEADLINE:** Your reservation must be received by **MAY 23, 2026**

Space is limited – **EARLY RESERVATIONS ARE ADVISED.** If you do not receive your confirmation within 10 days, or have any questions, contact Amy at [afskyview@yahoo.com](mailto:afskyview@yahoo.com) or call **only after 5:30PM** 732-581-1228

**All fees are non-refundable. Exam results are confidential.**

Payment preferred by PayPal to: **@MidJerseryLRC**

OR

by Venmo **@mjlr**

OR

Mail your check, made payable to **MJLRC, Inc.**

Mail your completed flyer (and checks) to:  
Amy Fairchild, 45 Alan Terrace, Howell NJ 07731 *by May 23, 2026.*

**Write individual checks for each owner.** You may not combine money on one check for more than one person. Confirmation & time will be by email.

FORM ON SECOND PAGE BELOW

## MJLRC SPRING HEALTH CLINIC FORM

<b>TIME PREFERENCE -</b> please list 1st., 2nd., & 3rd choice in the boxes	<b>8:00 – 9:40</b> <input style="width: 80%; height: 30px;" type="text"/>	<b>9:40 – 11:20</b> <input style="width: 80%; height: 30px;" type="text"/>	<b>11:20 – 1:00</b> <input style="width: 80%; height: 30px;" type="text"/>
<b>NAME</b>	<input style="width: 100%; height: 30px;" type="text"/>		
<b>ADDRESS</b>	<input style="width: 100%; height: 30px;" type="text"/>		
<b>PHONE</b>	<input style="width: 100%; height: 30px;" type="text"/>		
<b>EMAIL</b>	<input style="width: 100%; height: 30px;" type="text"/>		
<b>TEST</b>	<b># OF DOGS</b>	<b>COST PER TEST</b>	<b>TOTAL</b>
EYE EXAM	<input style="width: 80%; height: 30px;" type="text"/>	\$50.00 or > 2 \$40.00	<input style="width: 80%; height: 30px;" type="text"/>
HEART (AUSC. ONLY)	<input style="width: 80%; height: 30px;" type="text"/>	\$85.00 or > 1 \$ \$75.00	<input style="width: 80%; height: 30px;" type="text"/>
HEART (AUSC. + ECHO)	<input style="width: 80%; height: 30px;" type="text"/>	\$365.00 or > 1 \$350.00	<input style="width: 80%; height: 30px;" type="text"/>
<b>PACKAGES</b>			
EYE & ECHO	<input style="width: 80%; height: 30px;" type="text"/>	\$390.00	<input style="width: 80%; height: 30px;" type="text"/>
EYE & AUSC.	<input style="width: 80%; height: 30px;" type="text"/>	\$100	<input style="width: 80%; height: 30px;" type="text"/>
<b>TOTALS</b>	<input style="width: 80%; height: 30px;" type="text"/>	*****	<input style="width: 80%; height: 30px;" type="text"/>