

MORTALITY DATA REPORTING FORM

This form is to be used to report the death of all Deerhounds since January 2004 and is ongoing.

All information held in strict confidence

KC Registered name of Deerhound	
Sex of Hound (please circle as appropriate)	Male or Female
Date of Birth	
Date of Death	
Cause of death (illness/disease/trauma/injury/accident.	
Any concurrent illnesses or health problem	
Evidence e.g. post mortem/autopsy/veterinary reports would assist, if available.	Please attach reports and return with the form.

Name of owner

Contact details Tel/Email.....

Date.....

Please send form and details to:

Dr Sarah Helps, Porch House, Village Road, Coleshill, Amersham, Bucks. HP7 0LG

Email: beardswoodhounds@btinternet.com