

**Icelandic Sheepdog Association of America**

**Litter Information Check List**

Please complete and return via email to isaabreeders@gmail.com information collected will be used for Icelandic Sheepdog Pedigree Databases, Statistical Reports and optional Breeder Purchased Puppy Memberships.

**Breeder Name:** Click here to enter text. **Co Breeder Name/s:** Click here to enter text.

**Sire and Dam Information**

**Sire’s Registered Name:** Click here to enter text. **Dam’s Registered Name:** Click here to enter text.

**Sire’s Registration Number:** Click here to enter text. **Dam’s Registration Number:** Click here to enter text.

**Optional photo of Sire: Optional Photo of Dam:**

** **

**Breeding Information**

Please provide information about the Mating and Whelping to help us compile statistical data about the breed.

Mating: Choose an item. Whelping Choose an item. Birthdate Click here to enter a date.

**Litter Information**

Birthdate Click here to enter a date.

Number of Puppies Born: Males Click here to enter text. Females Click here to enter text.

**Puppy Information**

Please provide some information about each puppy. This information is essential for the breed databases and statistics. We have provided a spot to add optional photos, these may be used in databases or on websites.

If purchasing optional Puppy Memberships ($10 / each puppy) owner information is required, this is an introductory non-voting membership for 1 year. All club communications are electronic so email address is required. Please send Puppy Membership fees via check to**: ISAA, c/o Judi Vittetoe, 24417 E. Rosewood, Newman Lake, WA 99025 Owner Information is optional and will be kept confidential**

**Puppy 1**

Registered Name: Click here to enter text. Gender Choose an item.

AKC Registration Number Click here to enter text. Microchip Number Click here to enter text.

Color Click here to enter text. Possible Outcome Choose an item.

Number Dew Claws Front Choose an item. Number Dew Claws Rear Choose an item.

New Owner Name: Click here to enter text.

Street Address: Click here to enter text.

City: Click here to enter text. State: Click here to enter text. Zip Code Click here to enter text.

Email: Click here to enter text. Phone Number: Click here to enter text.

I would like to Purchase a Puppy Membership: Choose an item.

Optional Photo Puppy 1 Optional Photo Puppy 2

 

**Puppy 2**

Registered Name: Click here to enter text. Gender Choose an item.

AKC Registration Number Click here to enter text. Microchip Number Click here to enter text.

Color Click here to enter text. Possible Outcome Choose an item.

Number Dew Claws Front Choose an item. Number Dew Claws Rear Choose an item.

New Owner Name: Click here to enter text.

Street Address: Click here to enter text.

City: Click here to enter text. State: Click here to enter text. Zip Code Click here to enter text.

Email: Click here to enter text. Phone Number: Click here to enter text.

I would like to Purchase a Puppy Membership: Choose an item.

**Puppy 3**

Registered Name: Click here to enter text. Gender Choose an item.

AKC Registration Number Click here to enter text. Microchip Number Click here to enter text.

Color Click here to enter text. Possible Outcome Choose an item.

Number Dew Claws Front Choose an item. Number Dew Claws Rear Choose an item.

New Owner Name: Click here to enter text.

Street Address: Click here to enter text.

City: Click here to enter text. State: Click here to enter text. Zip Code Click here to enter text.

Email: Click here to enter text. Phone Number: Click here to enter text.

I would like to Purchase a Puppy Membership: Choose an item.

Optional Photo Puppy 3 Optional Photo Puppy 4

 

**Puppy 4**

Registered Name: Click here to enter text. Gender Choose an item.

AKC Registration Number Click here to enter text. Microchip Number Click here to enter text.

Color Click here to enter text. Possible Outcome Choose an item.

Number Dew Claws Front Choose an item. Number Dew Claws Rear Choose an item.

New Owner Name: Click here to enter text.

Street Address: Click here to enter text.

City: Click here to enter text. State: Click here to enter text. Zip Code Click here to enter text.

Email: Click here to enter text. Phone Number: Click here to enter text.

I would like to Purchase a Puppy Membership: Choose an item.

**Puppy 5**

Registered Name: Click here to enter text. Gender Choose an item.

AKC Registration Number Click here to enter text. Microchip Number Click here to enter text.

Color Click here to enter text. Possible Outcome Choose an item.

Number Dew Claws Front Choose an item. Number Dew Claws Rea Choose an item. r

New Owner Name: Click here to enter text.

Street Address: Click here to enter text.

City: Click here to enter text. State: Click here to enter text. Zip Code Click here to enter text.

Email: Click here to enter text. Phone Number: Click here to enter text.

I would like to Purchase a Puppy Membership: Choose an item.

Optional Photo Puppy 5 Optional Photo Puppy 6

 

**Puppy 6**

Registered Name: Click here to enter text. Gender Choose an item.

AKC Registration Number Click here to enter text. Microchip Number Click here to enter text.

Color Click here to enter text. Possible Outcome Choose an item.

Number Dew Claws Front Choose an item. Number Dew Claws Rear Choose an item.

New Owner Name: Click here to enter text.

Street Address: Click here to enter text.

City: Click here to enter text. State: Click here to enter text. Zip Code Click here to enter text.

Email: Click here to enter text. Phone Number: Click here to enter text.

I would like to Purchase a Puppy Membership: Choose an item.

**Puppy 7**

Registered Name: Click here to enter text. Gender Choose an item.

AKC Registration Number Click here to enter text. Microchip Number Click here to enter text.

Color Click here to enter text. Possible Outcome Choose an item.

Number Dew Claws Front Choose an item. Number Dew Claws Rear Choose an item.

New Owner Name: Click here to enter text.

Street Address: Click here to enter text.

City: Click here to enter text. State: Click here to enter text. Zip Code Click here to enter text.

I would like to Purchase a Puppy Membership: Choose an item.

Email: Click here to enter text. Phone Number: Click here to enter text.

I would like to Purchase a Puppy Membership: Choose an item.

Optional Photo Puppy 7 Optional Photo Puppy 8

 

**Puppy 8**

Registered Name: Click here to enter text. Gender Choose an item.

AKC Registration Number Click here to enter text. Microchip Number Click here to enter text.

Color Click here to enter text. Possible Outcome Choose an item.

Number Dew Claws Front Choose an item. Number Dew Claws Rear Choose an item.

New Owner Name: Click here to enter text.

Street Address: Click here to enter text.

City: Click here to enter text. State: Click here to enter text. Zip Code Click here to enter text.

Email: Click here to enter text. Phone Number: Click here to enter text.

I would like to Purchase a Puppy Membership: Choose an item.