



BKC EYE CLINIC

Sunday, June 1, 2025

Jefferson County Fair Park

Name:

Cell Phone No.:

Email Address:

Dog Name(s) & Breed:

OFA CAER Eye Exam _____ Qty \$70/dog **Total Amount Due: \$**

Payment Method: ☐ PayPal ☐ Personal Check or Cash at Appointment
(must be paid in full prior to eye drops or exam)

Checks payable to "BKC". Cash payments in the exact amount would be much appreciated, as we cannot guarantee that we'll be able to make change!

APPOINTMENT TIME OPTIONS

(please mark your 1st and 2nd choice of time slots)

☐ 9:00am – 9:30 am

☐ 11:30am – 12:00pm

☐ 9:30am – 10:00am

☐ 12:30pm – 1:00pm

☐ 10:00am- 10:30am

☐ 1:00pm – 1:30pm

☐ 10:30am – 11:00am

☐ 2:00pm – 2:30pm

☐ 11:00am – 11:30 am

☐ 2:30pm – 3:00pm

Please email your completed registration form and any questions to Jen Amundsen at bkchealthclinic@gmail.com

An appointment confirmation will be sent with additional instructions on how to complete your OFA Application.