

**THE SOFT-COATED WHEATEN TERRIER OPEN REGISTRY  
RELEASE FORM FOR AFFECTED DOGS**

I/We hereby acknowledge that I/we are the owner(s) of the dog described below. As such, I/we agree to release the right to publish the name of my/our dog/bitch in the Soft-Coated Wheaten Terrier Open Registry as a dog confirmed to be affected with protein-losing enteropathy (PLE), protein-losing nephropathy (PLN), juvenile renal disease (JRD)/renal dysplasia (RD), inflammatory bowel disease (IBD), renal failure (RF), and/or Addison's disease.

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Registration Name/Number

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Pet Name

I understand that this is an open registry and that the data contained in it will be available to anyone seeking such information from the Registry. I/We agree to hold the Soft-Coated Wheaten Terrier Clubs of America and Canada, the University of Pennsylvania, and Dr. Meryl Littman harmless against any claim(s) pertaining to the release of such information. For this release to be accepted by the Registry, all co-owners must sign below.

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Print Name (Primary Owner)

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Signature

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Date

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Street Address of Primary Owner

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Telephone

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City, State, Zip

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Print Name (Owner/Co-owner)

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Signature

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Date

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Print Name (Owner/Co-owner)

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Signature

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Date

Use a second sheet if necessary if there are more co-owners.

Please **FAX signed form to Dr. Meryl Littman at 215-573-6050** or mail to:

The SCWT Open Registry  
c/o Dr. Meryl Littman  
University of Pennsylvania School of Veterinary Medicine  
3900 Delancey Street  
Philadelphia, PA 19104-6010