

APPLICATION FOR REGISTRATION OF A COMPLETE LITTER – BREED REGISTER ONLY.ALL PUPPIES IN THE LITTER **MUST** BE MICROCHIPPED
AND MUST BE REGISTERED AT THE SAME TIME

TO BE COMPLETED BY REGISTERED OWNER/S OF DAM (MOTHER)

TO BE COMPLETED BY REGISTERED OWNER/S OF SIRE (FATHER)

Breed										Breed											
Name: Dam (Mother)					Microchip No.					Name: Sire (Father)					Microchip No.						
Reg. No. <input type="text"/>										Reg. No. <input type="text"/>											
If applicant is a minor – under 18 – legal guardian to sign & provide ID number										If applicant is a minor – under 18 – legal guardian to sign & provide ID number											
Surname (Mr/Mrs/Miss/Minor)										Surname (Mr/Mrs/Miss/Minor)											
First Names Tel No:										First Names Tel No:											
Postal Address										Postal Address											
Email										Mem. No.		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Signature Mandatory					I.D. Number					Signature Mandatory					I.D. Number						
If applicant is a minor – under 18 – legal guardian to sign & provide ID number										If applicant is a minor – under 18 – legal guardian to sign & provide ID number											
Surname (Mr/Mrs/Miss/Minor)										Surname (Mr/Mrs/Miss/Minor)											
First Names Tel No:										First Names Tel No:											
Postal Address										Postal Address											
Email										Mem. No.		<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Signature Mandatory					I.D. Number					Signature Mandatory					I.D. Number						

MATING DETAILS AND DATE OF BIRTH

I/We certify that the sire stated was mated to the dam stated.

Mating by: Natural Artificial Insemination

If by artificial insemination, contact KUSA office for additional requirements

1st MATING	D	D	M	M	Y	Y
2nd MATING	D	D	M	M	Y	Y

And the mating was witnessed by:

Date: Signature/s:

Date of birth of litter	D	D	M	M	Y	Y
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CONSTITUTION. Article 21 – JURISDICTION OF KENNEL UNION

Every person (a) making application to the Kennel Union for the registration, recording or transfer of a dog or the registration of an affix; shall be deemed thereby to have submitted to and agreed to be bound by the KUSA Constitution and all Schedules, with particular reference to Schedule 9, Code of Ethics, Rules Regulations and By-Laws framed thereunder, both in respect of every dog owned by him, registered or recorded in his name or owned, or registered or recorded by him jointly with another or others or owned or recorded or registered in the name of a nominee, or exhibited or handled by him.

METHOD OF PAYMENT

Please submit payment or proof of payment together with this application.

Cheques must be made payable to "The Kennel Union of Southern Africa"

Credit Card No. CVC No

Expiry Date Amount R

Cardholder Name (Please Print)

<input type="checkbox"/>	Cheque	<input type="checkbox"/>	EFT	<input type="checkbox"/>	Credit Card
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BANKING DETAILS
Proof of payment to accompany application
 Account: Kennel Union of Southern Africa
 Bank: First National Bank
 Branch: 202509 (Thibault Square)
 Account number: 51450025635

Breed Register Only

Reg. No. Dam										Reg. No. Sire										Date of Birth of litter		D	D	M	M	Y	Y										
Affix ENTER YOUR REGISTERED AFFIX HERE. DO NOT LEAVE SPACES BETWEEN LETTERS										(KUSA reserves the right to amend the common name/s proposed on this form. Unless otherwise specified by Breeder.) Requests for Health Certificates – parent's test results to be attached or to be on KUSA record.												N/E Not eligible for Export Pedigree N/P Progeny not eligible for registration															
NOTE: ALL PUPPIES IN THE LITTER MUST BE MICROCHIPPED AND MUST BE REGISTERED AT THE SAME TIME Attach Microchip Certificate (ID) Microchip Implantation is Mandatory COMMON NAMES (First Choice)															NOTE: SIMULTANEOUS TRANSFER OF OWNERSHIP IS OPTIONAL. DETAILS OF NEW OWNER TO BE INCLUDED ON THIS APPLICATION FORM* COMMON NAMES (Second Choice)															SEX M/F	Health Certificate To be issued Yes/No	Colour	Breeders Restriction	Tattoo			
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15							
1																																					
ID																*Initial and Surname of New Owner																					
2																																					
ID																*Initial and Surname of New Owner																					
3																																					
ID																*Initial and Surname of New Owner																					
4																																					
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10																																					
ID																*Initial and Surname of New Owner																					
11																																					
ID																*Initial and Surname of New Owner																					
12																																					
ID																*Initial and Surname of New Owner																					

To effect transfer of ownership at the same time as registration, the application form "Transfer of Registered Ownership Simultaneous to Registration of Litter" must be completed and signed by the breeder and all the joint owners of each of the pups to be transferred. The signed application form(s) must be attached to this litter registration application form.

