

**APPLICATION FOR CHANGE OF GRANTEES/REGISTERED OWNERSHIP
OF A KUSA AFFIX (KENNEL NAME)****[ALL APPLICANTS MUST BE CURRENT MEMBERS OF THE KENNEL UNION OF SOUTHERN AFRICA]
[KUSA AFFIX MUST BE CURRENT]**Application for **change of grantees, including, but not limited to the addition of Grantees, the removal of Grantees and change of the Primary Grantee.**Current fee for change of Grantees/Registered Ownership of an Affix is R832.00
Send Application Form and Proof of Payment in a single email to applications@kusa.co.za**I/We hereby apply for the grantees of the following KUSA Affix to be altered as follows**

AFFIX:

[Complete and sign a second application form if there were or will be more than four Registered Owners]

By signing this form and/or the insertion of my/our Name(s) & Surname(s), I/we understand and agree to conform and comply with the Bylaws, Policies, Protocols, Procedures, Code of Ethics and Rules & Regulations of KUSA and FCI.

NEW GRANTEES**PRIMARY GRANTEE:**Mr/Mrs/Ms/Miss
SURNAME.....
INITIALS
FIRST NAME.....
MEMBERSHIP NO:
TEL NO:
EMAIL:Mr/Mrs/Ms/Miss
SURNAME.....
INITIALS
FIRST NAME.....
MEMBERSHIP NO:
TEL NO:
EMAIL:**Signature**.....**Signature**Mr/Mrs/Ms/Miss
SURNAME.....
INITIALS
FIRST NAME.....
MEMBERSHIP NO:
TEL NO:
EMAIL:Mr/Mrs/Ms/Miss
SURNAME.....
INITIALS
FIRST NAME.....
MEMBERSHIP NO:
TEL NO:
EMAIL:**Signature**.....**Signature****[NOTE: ALL EXISTING & NEW JOINT OWNERS MUST SIGN THIS APPLICATION FORM]**

PREVIOUS/EXISTING GRANTEEES

PRIMARY GRANTEE:

Mr/Mrs/Ms/Miss
SURNAME.....
INITIALS
FIRST NAME.....
MEMBERSHIP NO:
TEL NO:
EMAIL:

Mr/Mrs/Ms/Miss
SURNAME.....
INITIALS
FIRST NAME.....
MEMBERSHIP NO:
TEL NO:
EMAIL:

Signature.....

Signature

Mr/Mrs/Ms/Miss
SURNAME.....
INITIALS
FIRST NAME.....
MEMBERSHIP NO:
TEL NO:
EMAIL:

Mr/Mrs/Ms/Miss
SURNAME.....
INITIALS
FIRST NAME.....
MEMBERSHIP NO:
TEL NO:
EMAIL:

Signature.....

Signature

[NOTE: ALL EXISTING & NEW JOINT OWNERS MUST SIGN THIS APPLICATION FORM]

Declaration of BREED(S) for which the use of the Affix is required:

1. 3.
2. 4.

A digital copy of the Affix Registration Certificate confirming the new Grantees will be emailed to the Primary Grantee

If the applicant is a minor – under 18 years of age – the Legal Guardian must sign and provide a copy of their I.D. document.

Legal Guardian Signature.....

Legal Guardian I.D. No.

Methods of Payment

☐ Visa ☐ MasterCard ☐ EFT

Credit Card No.....CVC No.....Exp. DateAmount R.....

Cardholder Name (Please print) Signature..... Date.....

BANKING DETAILS:

Account: Kennel Union of Southern Africa
Bank: First National Bank; Branch: Portside;
Branch Code: 210 651
Account Number: 51450025635; EFT Code: 250 655