



AUSTRALIAN NATIONAL KENNEL COUNCIL LTD

APPLICATION FOR REGISTRATION OF SEMEN

COLLECT FROM DOGS NSW OFFICE

1 HOUR EXPRESS – PICK UP

POST

1 HOUR - EXPRESS POST SAME DAY

EXPRESS POST: \$8.80

24 HOUR EXPRESS

DETAILS OF SEMEN

Frozen (Please indicate)

Batch No. **No. of Straws**

Storage and Location

Name of Dog

Registration No. **Breed**

Sire **Reg No.**

Dam **Reg No.**

Markings/Colour **Date of Birth**

Microchip/Tattoo No. (if any)

Purchasing Owner/s Name

Address

Membership No.

DECLARATION BY OWNER/S

I/We hereby certify I/we are the registered owner/s of the above mentioned frozen semen and apply to have the semen registered in my/our name/s. I/We attach the Certificate of Collection of Semen (Form 1) and in the case of imported semen, an original or certified copy of a complete three generation pedigree of the dog issued by the ANKC recognised Overseas Canine Controlling Body in the Country of which the dog is resident in, the necessary import/quarantine documentation and in the case of a non resident dog, the completed Re-registration application and fee.

Signature/s

.....

Date

Note: All owners are to sign this statement.

Credit Card Details Mastercard Visa Expiry Date: ____/____ CCV No: ____

Card Number

Please debit my credit card for the amount of \$ _____ + \$1.00 Credit Card surcharge Signature of cardholder: _____



AUSTRALIAN NATIONAL KENNEL COUNCIL LTD

CERTIFICATE OF COLLECTION OF SEMEN

DETAILS OF DONOR DOG

Name of Dog

Registration No. Breed

Sire Reg No.

Dam Reg No.

Markings/Colour Date of Birth

Microchip/Tattoo No. (if any)

Owner/s Name (of Donor Dog)

Address

Membership No.

DECLARATION BY OWNER/S

I/We hereby certify I/We are the registered owner/s of the above mentioned dog and that on / / (date) the dog was presented to the under mentioned Semen Collector for semen collection. I/We hereby authorise the Semen Collector to undertake the collection of semen.

Name of Owner/s

Signature/s

Date

(Note: All owners are to sign this statement)

SEMEN COLLECTOR DECLARATION

I hereby certify that on / / (date) the above named dog was presented for semen collection and that semen was collected from this dog. At the time of the collection the donor dog was entire with both testes fully descended and in the scrotum.

Semen type collected: Frozen No. of Straws/Vials/Pellets collected

Signed

Name of Semen Collector

Address

..... Date