

## APPLICATION FOR REGISTRATION OF A KUSA AFFIX (KENNEL NAME) ON THE FCI INTERNATIONAL KENNEL NAME REGISTER

**[APPLICANTS MUST BE CURRENT MEMBERS OF THE KENNEL UNION OF SOUTHERN AFRICA]  
[KUSA AFFIX MUST BE CURRENT]**

Application for **once-off** registration of a KUSA Affix on the FCI International Kennel Name Register @ **R367.00 (VAT incl.)**.  
**FCI registration** does not require renewal and endures for as long as the KUSA Kennel Name registration remains valid and current.  
KUSA Affixes are registered for a period of five years, after which Grantees have the right to renew the Affix for a further five (5) years.

**Send Application Form and Proof of Payment in a single email to [applications@kusa.co.za](mailto:applications@kusa.co.za)**

I/We hereby apply for the registration of the following KUSA Affix on the FCI International Kennel Name Register. In submitting this application, I/we accept and agree that, if the same or a substantially similar Kennel Name be already registered on the FCI International Kennel Name Register, the FCI will register the Kennel Name by adding the ISO Country Code **(ZA) to the Affix** and that I/we may use the Affix in South Africa without the (ZA) extension, **unless** a complaint is lodged by the foreign Kennel Name-holder and such complaint be upheld by the FCI, as valid. In the latter case, **I/we accept and agree** that, going forward the use of the Affix in South Africa shall be subject to **immediate modification by the addition of the (ZA) extension** when added to a dog's registered name as a Prefix or Suffix.

**[Complete and sign a second application form if there are more than two 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 the FCI.

### 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.....

**[NOTE: ALL JOINT OWNERS MUST SIGN THIS APPLICATION FORM]**

Signature .....

### Declaration of BREED(S) for which the use of the Kennel Name is required:

- |         |         |
|---------|---------|
| 1. .... | 3. .... |
| 2. .... | 4. .... |

**A digital copy of the Affix Registration Certificate confirming FCI registration 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. Date .....Amount 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