

## APPLICATION FOR LISTING OF A COMPLETE LITTER – **Non-registry Breed Listing** – MATING APPROVED BY EXCO

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

MEMBERSHIP MUST BE CURRENT

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

MEMBERSHIP MUST BE CURRENT

<b>Breed</b>  <b>Name: Dam</b> (Mother) ..... Microchip No. .... DNA No: .....  Reg. No. ....  If applicant is a minor – under 18 – legal guardian to sign & provide ID number  Surname (Mr/Mrs/Miss/Minor) ..... First Names ..... Tel No: .....  Postal Address .....  Email .....	<b>Breed</b>  <b>Name: Sire</b> (Father) ..... Microchip No. .... DNA No: .....  Reg. No. ....  If applicant is a minor – under 18 – legal guardian to sign & provide ID number  Surname (Mr/Mrs/Miss/Minor) ..... First Names ..... Tel No: .....  Postal Address .....  Email .....
---	--

\*By my signature to this form, I/We the registered owners(s) of the dam of this litter, affirm that the puppies here listed have been microchipped as per details hereby given. I/We hereby declare that I/we accept and understand that if any information is found to be inaccurate to any degree whatsoever, that I/We may be subject to disciplinary action in terms of Schedule 1.

<b>Signature</b> *Mandatory ..... I.D. Number .....  If applicant is a minor – under 18 – legal guardian to sign & provide ID number  Surname (Mr/Mrs/Miss/Minor) ..... First Names ..... Tel No: .....  Postal Address .....  Email .....	<b>Signature</b> Mandatory ..... I.D. Number .....  If applicant is a minor – under 18 – legal guardian to sign & provide ID number  Surname (Mr/Mrs/Miss/Minor) ..... First Names ..... Tel No: .....  Postal Address .....  Email .....
---	--

\*By my signature to this form, I/We the registered owners(s) of the dam of this litter, affirm that the puppies here listed have been microchipped as per details hereby given. I/We hereby declare that I/we accept and understand that if any information is found to be inaccurate to any degree whatsoever, that I/We may be subject to disciplinary action in terms of Schedule 1.

<b>Signature</b> *Mandatory ..... I.D. Number .....	<b>Signature</b> Mandatory ..... I.D. Number .....
---	--

### MATING DETAILS AND DATE OF BIRTH

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

**Natural Mating**   
  **Artificial Insemination**

If by artificial insemination, contact KUSA office for additional requirements

1 <sup>st</sup> MATING	D	D	M	M	Y	Y
2 <sup>nd</sup> MATING	D	D	M	M	Y	Y

Date of birth of litter	D	D	M	M	Y	Y
-------------------------	---	---	---	---	---	---

And the mating was witnessed by:

Date: ..... Signature/s: .....

### 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

Visa   
  EFT   
  Master Card

### METHOD OF PAYMENT

Please submit payment or proof of payment together with this application to [applications@kusa.co.za](mailto:applications@kusa.co.za)  
 Credit Card No. .... CVC No .....

Expiry Date ..... Amount R .....

Cardholder Name (Please Print) .....

Cardholder Signature ..... Date .....

### BANKING DETAILS

Account: Kennel Union of Southern Africa  
 Bank: First National Bank  
 Branch: 202509 (Greenpoint)  
 Account number: 51450025635



	SEX M/F	Health Certificate Yes/No	Colour	Restrictions
Choice 1				
Choice 2				
Chip No.				
*Initial and Surname of New Owner				<b>N / B*</b>

	SEX M/F	Health Certificate Yes/No	Colour	Restrictions
Choice 1				
Choice 2				
Chip No.				
*Initial and Surname of New Owner				<b>N / B*</b>

	SEX M/F	Health Certificate Yes/No	Colour	Restrictions
Choice 1				
Choice 2				
Chip No.				
*Initial and Surname of New Owner				<b>N / B*</b>

	SEX M/F	Health Certificate Yes/No	Colour	Restrictions
Choice 1				
Choice 2				
Chip No.				
*Initial and Surname of New Owner				<b>N / B*</b>

	SEX M/F	Health Certificate Yes/No	Colour	Restrictions
Choice 1				
Choice 2				
Chip No.				
*Initial and Surname of New Owner				<b>N / B*</b>

Version November 2021

**\* NB A KUSA IMPOSED BREED RESTRICTION "NOT AUTHORISED FOR BREEDING" WILL BE PLACED ON EACH PUP LISTED.THE LIFTING OF THE BREED RESTRICTION IS AT THE SOLE DISCRETION OF KUSA AND WILL ONLY BE CONSIDERED IF DEEMED OF BENEFIT TO THE LOCAL GENE POOL OF THE BREED.**

**N.B The pups will be listed on the Non-registry Breed Listing and only a Non-registry Breed Listing Certificate will be issued**

**\*To effect transfer of ownership at the same time, the Application Form "Transfer of Registered Ownership Simultaneous to Registration of the Litter" must be completed and signed by the Breeder and the owner(s) of each pup and be submitted together with the Application for the listing of the litter.**

**N.B. The use of the SA Post Office as the service provider for the despatch of Registration Certificates has been terminated.**

**Send a single email to [applications@kusa.co.za](mailto:applications@kusa.co.za) with the following 3 attachments:**

**Application Form + Proof of Payment + Courier Delivery Form**

**No Certificates will be issued or despatched without payment of the required Courier Fee.**