



THE KENNEL UNION OF SOUTHERN AFRICA
 6TH FLOOR, 'BREE CASTLE', 68 BREE STREET, CAPE TOWN, 8001 P.O. BOX 2659, CAPE TOWN, 8000
 TEL. (021) 423-9027 FAX: (021) 423-5876 EMAIL: info@kusa.co.za WEB: www.kusa.co.za



APPLICATION TO REGISTER A SINGLE DOG
OBEDIENCE AND TRIAL DOGS RECORD (DOGS OF ANY ANCESTRY)

Microchip Implantation is mandatory for registration purposes.

Obedience and Trial Dogs Record. (Dogs of any ancestry). KUSA membership not mandatory. Dogs on this record are not eligible to compete in any Breed (Conformation/Beauty) Show or any Field Trials. They may compete in Obedience, Working Trials (Classic), Dog Jumping, Dog Carting, Agility, Flyball and IPO events held at Championship and Non Championship Shows. If a common name has been recorded, the same name shall not be recorded on any KUSA Record of dogs for a period of ten (10) years following such recording. Please provide an alternate (second choice) name. Certificate of Registration for Obedience and Trial dogs, will exclude genealogy of dog. Dogs entered on this record can only be designated as a Crossbreed, Mixed Breed, or Breed Type it most closely resembles Eg. Dobermann Cross or Dobermann Type.

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

BREED TYPE

DATE OF BIRTH	D	D	M	M	Y	Y	SEX	M/F	COLOUR	HD GRADING	optional	TATOO NO MICROCHIP NO.	Attach Certificate Microchip Implantation Mandatory
											ED GRADING	optional		

NAME OF DOG (First Choice)	NAME OF DOG (Second Choice)
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NAME OF CURRENT OWNER (1) TITLE FIRST NAMES SURNAME MEMBER NO. (if applicable)	NAME OF CURRENT OWNER (2) TITLE FIRST NAMES SURNAME MEMBER NO. (if applicable)
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POSTAL ADDRESS OF CURRENT OWNER (1) Postal Code: EMAIL ADDRESS :	POSTAL ADDRESS OF CURRENT OWNER (2) Postal Code: EMAIL ADDRESS :
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TEL. CONTACT NUMBER (H) CELL: (W)	TEL. CONTACT NUMBER (H) CELL: (W)
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I hereby declare that, I am the legal owner of this dog, that I have never been convicted of a charge of cruelty to or neglect of animals and have never been suspended or expelled by KUSA.

SIGNATURE	DATE	SIGNATURE	DATE
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If applicant is a minor under 18 years legal guardian to sign here: _____ Date: _____ Guardian I.D. No: _____	If applicant is a minor under 18 years legal guardian to sign here: _____ Date: _____ Guardian I.D. No: _____
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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 this Constitution and all Schedules, with particular reference to Schedule 9, Code of Ethics, Rules, Regulations and By-Laws framed thereunder, both in respect of himself and in respect of every dog owned by him, registered or recorded in his name or owned, registered and recorded by him jointly with another or others or owned or registered or recorded in the name of a nominee, or exhibited or handled by him.