|  |  |
| --- | --- |
| C:\Users\julie\AppData\Local\Microsoft\Windows\Temporary Internet Files\Content.IE5\BSOTOOGK\web-logo-with-words.gif | ***The Cat Association of the Northern Territory (Inc.)****ABN 50 279 332 611 affiliated with A.C.F. Inc.***REGISTRAR****PO BOX 40437**Website: <http://www.cant.asn.au> CASUARINA NT 0811 |

need help press F1

**download, complete (use tab key to move between fields), print, sign and post to the above address, with payment**

**Payment may be made by cheque or direct deposit to the CANT account at ANZ BSB 015 896 account 498013318**

FEE: $8.50 per application

## APPLICATION FOR REGISTRATION OF LITTER

(Conditions apply - Refer to Rules and Regulations for full details)

|  |  |  |
| --- | --- | --- |
| **OFFICE USE ONLY** | **Litter No:** |  |
| **DATE OF BIRTH:** |  | **PREFIX:** |  |
| **BREED:** |  | **COLOUR (if known):** |  |
|  |
| **NAME OF BREEDER:** |  | **TEL NO:**  |  |
| **ADDRESS:** |  |
| **E-mail:** |  |
| **\*SIRE:** |  | **REG NO:** |  |
| **DAM:** |  | **REG NO:** |  |
| \*NB: If Sire not registered with The C.A.N.T. (Inc) a copy of the certified pedigree from the registering Cat Control is required. |
| **NO:** | **SEX:** | **BREED:** | **COLOUR:** | **NAME:** (If known) |
| **1.** |  |  |  |  |
| **2.** |  |  |  |  |
| **3.** |  |  |  |  |
| **4.** |  |  |  |  |
| **5.** |  |  |  |  |
| **6.** |  |  |  |  |
| **7.** |  |  |  |  |
| **8.** |  |  |  |  |

I hereby certify that the above particulars are true and correct to the best of my knowledge and belief.

#### SIGNATURE OF THE BREEDER \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_

#### SIGNATURE OF REGISTRAR \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE \_\_\_\_\_\_\_\_\_\_\_\_\_\_

## CERTIFICATE OF STUD SERVICE

|  |  |  |  |
| --- | --- | --- | --- |
| **I hereby certify that:** |  | **Reg No.** |  |
| **owned by:** |  |
| **was served by:** |  | **Reg No.** |  |
| **On:** |  |
| **Name of Stud Owner:** |  | **Tel No.** |  |
| **Address:** |  |
| **SIGNATURE:** |  | **DATE:** |  |