APPLICATION FOR REGISTRATION OF DOG (One Puppy)

DNZ OFFICE USE ONLY

Litter whelped (born) on

Date	Month	Year

Breed/Variety _____

DAM _____

SIRE _____

Dogs NZ Membership No(s)	BREEDER'S NAME(S)

Phone: **Date:**

Email:

Breeders Signature (All breeders must sign)

I/We certify that the information contained in this application is correct. I/we certify that ALL requirements of the Animal Welfare Act 1999 and subsequent regulations have been adhered to.

Kennel Name of breeder: PREFIX _____ **SUFFIX (of)** _____

Enter preferred Puppy name below excluding the Kennel name. (Please Note: Full name including Kennel name must not exceed 25 letters and up to 30 spaces)

Puppy name (1st choice)	**Sex D or B**	**Colour in Full**

This puppy is to be transferred to - leave blank if not transfering puppy
(Mr/Mrs/Miss - Initials - Surname - Full Postal Address)

Restricted register tick box
Signatures required refer below

Office Use Only

Phone	**Email**	**Signature of new owner required if jointly owned with breeder**
Microchip number		

ENDORSEMENTS (1-8 See reverse)

IMPORTANT - CONSENT OF NEW OWNERS MUST BE OBTAINED FOR ANY ENDORSEMENTS INCLUDING THE RESTRICTED REGISTER

I/We hereby consent to the placing of the following endorsements ( )( )( ) *(State Number(s) from reverse)* **OR** I/We hereby consent to the placement of this puppy on the Restricted Register (endorsement 9) as above.

Name of New Owner(s) _____ Signature of New Owner(s) _____ Date _____

SECOND KENNEL NAME (OPTIONAL)

NZKC Number(s) OR Name and address if Overseas _____

Linking Pronoun (if any)

Second Kennel Name (Must be suffix only)

Consent of all registered owner(s) of Second Kennel Name

Connection between Puppy and Second Kennel Name _____

Signature(s) **Signature(s)**

Important

You must select which register each puppy is to be recorded on. If the box is not selected then the puppy will automatically be registered on the Full Register. Any puppies registered on the Restricted Register may Not Be Bred From, Not Shown (but can compete in Agility and Obedience) and are Not Eligible for Issue of an Export Pedigree.The dog may be elevated to the Full Register at any time with the written consent of the Breeder. Conditions apply. - see Registration Regulations. **All Restricted Register puppies must have all owners consent (signature(s).**

ENDORSEMENTS (Fee applies - see below)

1. Not to be Bred from
2. Not to be Shown
3. Not to be Bred from under 12/18/24/36 months (Indicate Period)
4. Not to be Bred from unless X-rayed/radio-graphed under a recognised scheme for the eradication of HD
5. Not to be bred from unless X-rayed/ radio-graphed under a recognized scheme for the eradication of HD and a certificate has been issued with a total score less than the current breed average at time of X-Ray.
6. Monorchid
7. Cryptorchid
8. Not eligible for issue of an Export Certificate
9. Restricted Register (Includes endorsement 1,2,8)

An endorsement Not to be Shown does not prohibit exhibition in Obedience and Agility

Important
In case your first choice puppy name is not available, please provide alternative names. If you do not supply an alternative Dogs NZ will name the puppy.

ALTERNATIVE NAMES - DOGS	ALTERNATIVE NAMES - BITCHES

REGISTRATION & TRANSFER FEES

FULL REGISTER
Registration without Transfer under 6 mths $30
Fee to add an endorsement ($7 per endorsement)..... $7
Registration and Transfer under 6 mths $45

SECOND KENNEL NAME FEE
Adding a second kennel name (new registration) $45
Adding a second kennel name (already registered)..... $90

RESTRICTED REGISTER
Registration without Transfer (under 6 mths) $45
Registration and Transfer (under 6 mths)..... $60

For a full list of fees see our website: dogsnz.org.nz

For Registrations after 6 months of age penalty fees will apply.

Tick box ✓

☐ **Credit Card** (Visa or Mastercard only)

Cardholder's Name (Print): _____ **Amount Paid $** _____

Card Number: ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ **Expiry** _____ **Signature** _____

☐ **Internet Banking** DNZ Account 03-0547-0104575-00

Please ensure when Internet Banking you include your membership No. and abbreviated details of services being paid for.

Internet Banking - Amount Paid $ _____ **Date Payment made** _____ **Reference info** _____

The completed application, together with your payment should be forwarded to: Dogs New Zealand, Private Bag 50903, Porirua 5240, or scanned and emailed to accounts@dogsnz.org.nz