ACT Canine Association Inc. (ABN 11150955611) trading as Dogs A.C.T.

Exhibition Park, Federal Highway, Mitchell, ACT.

PO Box 815, Dickson ACT 2602. Phone 02 62414404.

Email: administrator@dogsact.org.au or visit: [http://www.dogsact.org.au](http://www.dogsact.org.au/)

Office hours 9.30am to 2.30pm Tuesday to Thursday

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| **APPLICATION FOR EXPORT PEDIGREE**  |  | **$100.00** |

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| **BREED:** |       | **SEX.**  |       |
| **NAME OF DOG:** |       |
| **REGISTRATION No:** |       |
| **MICROCHIP NUMBER:** |       |
| **APPLICANT/S:** |       |
| **MEMBERSHIP NUMBER:** |       |
| **ADDRESS:** |       |
|  |       |
| **POST CODE:** |       |
| **PHONE NUMBERS:** |       | **MOBILE:** |       |
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| **SIGNATURE/S:** |  |  |  |
| **DATE:** |       |  |       |
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| **ALL OWNERS MUST SIGN UNLESS PRIOR INSTRUCTIONS ARE LODGED WITH THE CONTROLLING BODY****IN SIGNING THIS FORM – THE OWNERS AGREE TO THE PUBLICATION OF THIS EXPORT AS PER ANKC REGULATIONS** |
| **NAME/S OF OVERSEAS PERSON/S** WHOM DOG IS TO BE TRANSFERRED AND EXPORT MADE OUT TO. |       |
|       |
|       |
| **ADDRESS:** |       |
|  |       |
| **COUNTRY:** |       |
|  |  |
| **PLEASE FORWARD THE COMPLETED APPLICATION TO:****ACT CANINE ASSOCIATIONS (DOGS ACT) – PO BOX 815, DICKSON, ACT, 2602** |
| **ADDRESS:**To prevent the loss of this document, it will be returned to the applicant to on forward to the new owner. |       |
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|  |       |
| **IMPORTANT: THE COMPLETED APPLICATION MUST BE ACCCOMPANIED BY THE****ORIGINAL REGISTRATION CERTIFICATION FILLED IN ON THE REVERSE WITH THE****DETAILS OF THE NEW OVERSEAS OWNER/S.** |
|  |
| **EXPORT CERTIFICATE $100.00 INCLUDING GST.Dogs ACT - PO Box 815 Dickson, ACT, 2602** |