



DOGS NSW – RE-REGISTRATION OF IMPORTED SEMEN

(The dog from which the semen was taken must be registered with an overseas body recognised by the Australian National Kennel Council Ltd).

☐ COLLECT FROM DOGS NSW OFFICE

☐ POST (Tracking Included)

☐ EXPRESS POST (*See scale of charges for fee)

DETAILS OF SEMEN DONOR DOG OR STUD DOG

Breed:

Name of Dog:

Registration No:

Colour/Markings:

Microchip No:

Country Semen/Stud Dog From:

DETAILS OF REGISTERED OVERSEAS OWNER/S

Name:

Address:

DETAILS OF OWNER IN AUSTRALIA OF SEMEN:

Note: A resident of NSW purchasing semen from an overseas dog must be a Member of DOGS NSW.

Name of Semen Owner(s):

Membership No:

Address:

Postcode:

SEMEN DETAILS

Name and Address of storing Veterinary Clinic:

Straw / Vial amount:

Straw / Vial Batch/Numbers:

I/we hereby apply for re-registration of the above dogs details onto the ANKC Ltd Database and attach necessary documentation as per ANKC Ltd Regulations Part 6, clause 6.4)

1. Original or certified copy of three generation pedigree (if imported and has not been previously registered);

(Note: We will accept a scanned three generation pedigree by email only if sent **direct** from the Controlling Body in the Country where the dog is registered to the Controlling Body in Australia) All documentation submitted with an application for re-registration of an imported dog and/or semen must be in English or accompanied by an official document translated in English by an authorised interpretation/translation service.

(DOGS NSW Regulations Part 1, Clause 9.4)

2. Photocopy of the ownership certificate;
3. Photocopy of the semen collection certificate;
4. Photocopy of DoA final clearance certificate (AQIS final clearance certificate)

Signature/s of ALL registered OVERSEAS owner/s of dog:

Date: / /

NOTE: Semen which is required to be re-registered is not eligible to be used for breeding purposes until this application (and ALL accompanying documents listed above) are lodged and certified to be complete.

PAYMENT DETAILS: ☐ PLEASE TICK IF ELIGIBLE FOR CONCESSION RATES

Credit Card type: ☐ Mastercard ☐ Visa

Card Number Expiry Date: / CCV No:

I wish to donate to the RNSWCC Health & Welfare Charity Ltd. Donations greater than \$2.00 are Tax Deductible. ☐ Yes ☐ No
My donation amount is \$ _____ Please refer overleaf for more details about RNSWCC Health & Welfare Charity Ltd.

Charge my Credit Card for the amount of \$ + \$1.00 Credit Card surcharge.

Signature of Cardholder:

Date:



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APPLICATION CHECKLIST:

The following check list is to be completed to ensure your application is correct and contains all documents required when submitting to the office.

- | | |
|--------------------------|---|
| <input type="checkbox"/> | Has the Re-Registration Application has been completed and signed by the overseas owner of the dog? |
| <input type="checkbox"/> | Certified 3 Generation Pedigree Certificate from the overseas Kennel Club |
| <input type="checkbox"/> | Copy of the Ownership Certificate from the overseas Kennel Club (only required if two separate documents from the above pedigree) |
| <input type="checkbox"/> | Has all documentation been translated in English by an authorised/translation service, eg, NSW Government Multicultural NSW Interpreting & Translation Services https://multicultural.nsw.gov.au/our_services?interpreting_translation |
| <input type="checkbox"/> | Copy of the Ownership Certificate from the overseas Kennel Club (only required if two separate documents from the above pedigree) |
| <input type="checkbox"/> | DoA Release Form from Quarantine |
| <input type="checkbox"/> | ANKC Ltd Collection of Semen to be completed and signed by the overseas owner and the Collector |
| <input type="checkbox"/> | ANKC Ltd Registration of Semen to be completed by the owners of the semen |
| <input type="checkbox"/> | Are there any particular breed requirements for this breed? If so, have you attached the required documentation? |

I/we being the registered members completing this application hereby declare that I/we have provided all information listed on the checklist to ensure our application can be processed.

All Owners' Signature(s):

Date: / /

ROYAL NSW CANINE COUNCIL HEALTH & WELFARE CHARITY LIMITED

ABN: 25 623 980 165 | info@caninewelfare.org.au | 02 9834 0520 | www.caninewelfare.org.au

The Royal NSW Canine Council Health and Welfare Charity Limited was established to prevent or relieve the suffering of canines. The Charity aims to do this by;

- Arranging short-term direct care for canines which have been lost, mistreated or are without owners;
- Arranging for the rehabilitation of orphaned, sick or injured canines which have been lost, mistreated or are without owners;
- Funding research into the causes, prevention or cure of diseases in canines;
- Creating and endowing scholarships and fellowships;
- Providing education in relation to all aspects of canines;
- Arranging for the training of canines to assist people who are disadvantaged

ALL DONATIONS OVER \$2.00 TO THE CHARITY ARE TAX DEDUCTABLE.

The completed application should be forwarded to: The Secretary, DOGS NSW, P.O. Box 632, St Marys NSW 1790
Royal New South Wales Canine Council Ltd ABN 69 062 986 118 trading as DOGS NSW
Phone 02 9834 3022 or email info@dogsnsw.org.au



DOGS AUSTRALIA

CERTIFICATE OF COLLECTION OF SEMEN
(TO BE COMPLETED BY OVERSEAS OWNER OF THE DOG)

DETAILS OF DONOR DOG

Name of Dog

Registration No. Breed

Sire Reg No.

Dam Reg No.

Markings/Colour Date of Birth

Microchip/Tattoo No. (if any)

Owner/s Name (of Donor Dog)

Address

Membership No.

DECLARATION BY OWNER/S

I/We hereby certify I/We are the **registered owner/s** of the above mentioned dog and that on / / (date) the dog was presented to the under mentioned Semen Collector for semen collection. I/We hereby authorise the Semen Collector to undertake the collection of semen.

Name of Owner/s

Signature/s

Date

(Note: All owners are to sign this statement)

SEMEN COLLECTOR DECLARATION

I hereby certify that on / / (date) the above named dog was presented for semen collection and that semen was collected from this dog. At the time of the collection the donor dog was entire with both testes fully descended and in the scrotum.

Semen type collected: Frozen No. of Straws/Vials/Pellets collected

Signed

Name of Semen Collector

Address

Date



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DOGS AUSTRALIA

APPLICATION FOR REGISTRATION OF SEMEN (TO BE COMPLETED BY THE NSW MEMBER WHO IMPORTED THE SEMEN)

DETAILS OF SEMEN

Batch No. _____ No. of Straws _____

Storage and Location _____

Name of Dog _____

Registration No. _____ Breed _____

Sire _____ Reg No. _____

Dam _____ Reg No. _____

Markings/Colour _____ Date of Birth _____

Microchip/Tattoo No. (if any) _____

Owner/s Name _____

Address _____

Membership No. _____

DECLARATION BY OWNER/S

I/We hereby certify I/we are the registered owner/s of the above mentioned frozen semen and apply to have the semen registered in my/our name/s. I/We attach the Certificate of Collection of Semen (Form 1) and in the case of imported semen, an original or certified copy of a complete three generation pedigree of the dog issued by the DOGS AUSTRALIA recognised Overseas Canine Controlling Body in the Country of which the dog is resident in, the necessary import/quarantine documentation and in the case of a non resident dog, the completed Re-registration application and fee.

Signature/s _____

Date _____

Note: All owners are to sign this statement.

Credit Card Details Master ☐ d Visa ☐ Expiry Date: _____ CCY/No: _____
Card Number

Please debit my credit card for the amount of \$ _____ Signature of cardholder: _____