

CERTIFICATE OF USE OF REGISTERED SEMEN

DETAILS OF DONOR DOG

Name of Dog	
Semen Registration Number	
Breed	
Owner/s Name	
Address	
Membership No.	

DECLARATION BY INSEMINATING VETERINARIAN

I hereby certify that on / / (date) the bitch identified to me as detailed hereunder was inseminated by me with frozen semen from the above-mentioned dog.

DETAILS OF INSEMINATED BITCH

Name of Bitch			
Registration Number		Breed	
Microchip / Tattoo No. (If any)			
Owner/s Name			
Address			
Membership No.			
No. of Straws/Vials/Pellets Used			
Batch number of Straws/Vials/Pellets Used			

VETERINARIAN'S SIGNATURE

Veterinarian Signed	
Name of Veterinarian	
Address	
Date	