



**SOUTH AUSTRALIAN WORKING SHEEPDOG ASSOCIATION INCORPORATED**

**FORM OF APPLICATION FOR REGISTRATION**

Breed: \_\_\_\_\_ Sex: \_\_\_\_\_

Name of dog: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Colour: \_\_\_\_\_

Breeder: \_\_\_\_\_

\_\_\_\_\_  
(name and address)

Owner: \_\_\_\_\_

\_\_\_\_\_  
(name and address)

Sire's sire: \_\_\_\_\_

Reg. no. \_\_\_\_\_

Sire: \_\_\_\_\_

Reg. no. \_\_\_\_\_

Sire's dam: \_\_\_\_\_

Reg. no. \_\_\_\_\_

Dam's sire: \_\_\_\_\_

Reg. no. \_\_\_\_\_

Dam: \_\_\_\_\_

Reg. no. \_\_\_\_\_

Dam's dam: \_\_\_\_\_

Reg. no. \_\_\_\_\_

**Signed:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Fees:** dogs/pups from a notified litter \$5, dogs/pups not from a notified litter but from registered parents \$10, dogs/pups not from a notified litter and with one or more unregistered parent (conditions apply) \$50

**Post** this form with the fee to Mrs Joanne Flavel, SAWSDA Secretary, PO Box 338, Meningie, 5264.

**You must be a full financial member of SAWSDA to register a dog/pup.**