

Telephone: 9788 2500 Fax: 9788 2599 www.dogsvictoria.org.au office@dogsvictoria.org.au

## APPLICATION TO TRANSFER FROZEN SEMEN

\$52.00

This form is to be used if the original owner of the frozen semen, as registered on the ANKC Database, is transferring any part of the registered frozen semen to another party.

## **Business Address:**

Dogs Victoria
655 Westernport Hwy, Skye 3977
Postal Address:
Locked Bag K9, Cranbourne 3977

## PLEASE COMPLETE ALL DETAILS ON THIS FORM IN BLOCK LETTERS

I/WE MAKE AN APPLICATION TO TRANSFER FROZEN SEMEN REGISTERED ON MY/OUR BEHALF WITH DOGS VICTORIA AND LIST BELOW DETAILS PERTAINING TO THIS TRANSFER.

DETAILS OF REGISTERED OWNER/S

TITLE: Mr Mrs Miss Ms FIRST NAME	SURNAME
RESIDENTIAL ADDRESS	SUBURB
DOGS VICTORIA MEMBERSHIP NUMBER	TELEPHONE (HOME) (BUSINESS)
DETAILS OF REGISTERED DONOR DOG	
REGISTERED NAME	REGISTERED No.
BREED	Straws NUMBER OF STRAWS/VIALS/PELLETS Vials Pellets
DETAILS OF PERSON/S SEMEN TO BE TRANSFE	RRED TO
TITLE: Mr Mrs Miss Ms FIRST NAME	SURNAME
RESIDENTIAL ADDRESS	SUBURB
ANKC LTD MEMBER BODY MEMBERSHIP NUMBER	TELEPHONE (HOME) (BUSINESS)
SIGNATURE OF REGISTERED OWNER/S (all owners of semen must sign)	EFFECTIVE DATE OF TRANSFER  DAY MONTH YEAR
PAYMENT BY CREDIT CARD	Mactercard
Expiry Date: / Amount \$  Cardholders Name:	Mastercard CCV Visa
Card No	
Signature:	

TICK here to OPT OUT of the Facility Fund Levy

<sup>\*\*</sup> This transaction incurs an additional \$2.20 Facility Fund Levy

<sup>\*\*</sup> The Facility Fund Levy contributes to the Dogs Victoria Facility Fund, which is 100% dedicated to the projects vital for the sustained operation of the KCC Park and Bulla facilities.