



North Australian Canine Association (Inc)

Trading as **DOGS NT**

A member Body of the Australian National Kennel Council

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APPLICATION FOR REPLACEMENT CERTIFICATE OF REGISTRATION and PEDIGREE

NAME OF DOG:

REGISTRATION NUMBER:

REGISTERED OWNERS DETAILS

NAME:

MEMBERSHIP NUMBER

RESIDENTIAL ADDRESS

SUBURB

POSTCODE

POSTAL ADDRESS

SUBURB

POSTCODE

TELEPHONE (Home)

TELEPHONE (Bus/Mobile)

SIGNATURE:

DATE:

NOTE: A Declaration giving full particulars of the loss of the original must be provided in the space below. A Duplicate Certificate will only be issued to the registered owner of the dog.

DECLARATION

Signature:

Witness:

