# ogs

**Details Of Donor Dog** 

## **DOGS NT**

(Member Body of the Australian National Kennel Council Ltd) **Post:** PO Box 37521, Winnellie NT 0821 **Ph**: 8984 3570

email: info@dogsnt.com.au website: www.dogsnt.com.au

### CERTIFICATE OF USE OF REGISTERED SEMEN

Name Of Dog:	
Semen Registration Number:	Breed:
Owners Name:	Membership #:
Residential Address (Inc Postcode):	
Details Of Inseminated Bitch	
Name Of Bitch:	Breed:
Microchip Number:	
Owner/s Name:	<b>DOGS</b> <sup>Membership</sup> #:
Residential Address (Inc Postcode):	NT
Number Of 'Straws' Used:	A.C.A

#### Declaration By Inseminating Veterinarian:

I hereby certify that on the bitch identified to me as detailed above was inseminated by me with Frozen semen from the above-mentioned dog:

#### \* Signature

(By signing you hereby declare that all the information provided herein is true and correct)

Date:

#### Full Name

Address (Inc Postcode):

This certificate MUST be attached to the Litter Registration Form.