

## **APPLICATION FOR TRANSFER OF A CAT/KITTEN 2019**

This form to be used for the transfer of ownership of ONE CFSA registered cat / kitten

CFSA · NATIONAL CAT REGISTER (NCR) · P O BOX 6682, ANSFRERE, DISCOVERY, 1709 EMAIL registrar@cfsa.co.za · CELL 083 297 6505 · FAX 086 513 0426 OFFICE HOURS: Mondays - Fridays 09h30 - 16h30 · Closed on Public Holidays and weekends

CAT DETAILS	NAME OF CAT		Registration number		М				C	Date of b	oirth						
	NAME OF CAT		Breed coo	de							Exam	ple PER08	SOB				
DET,	Full details of cat (for identification purposes)																
CAT	Breed		Gender		М	F		Mid	rochip avai								
	Colour and pattern																
PARENT DETAILS	NAME OF SIRE		Registration number		М				S	Stud nun	nber	S					
	NAIVIE OF SIKE		CFSA Bree	ed							Exam	ple EXO36	SOM				
	Registration   _																
				on r	М				S	tock nu	number D						
	NAME OF DAM		Breed coo	de							Exam	ple PER08	SOB				
	SURNAME		Title	itle				ID number									
	FIRST NAME		E-mail		1												
	Postal address		Postal co	de					ell nun								
AILS	Physical address		Postal co	de					her co numb								
DET	CATTERY NAME		Cattery co	ode				Fa	Fax number								
DER	Club membership	It is a pre-requisite that all registered breeders must be a current member of a please tick appropriate box where membership renewed		FSA a	ffiliated	f club; FFC KZNCC LPP NC							NCS				
PRESENT OWNER / BREEDER DETAILS		NO CASH DEPOSITS PLEASE															
	I, the undersigned, declare:  that the particulars provided above and below are complete and true to the best of my knowledge  that I have provided the new owner with the required documents as stipulated in the CFSA Breeder			Bank / Branch NEDBANK - Randridge													
				Account holde										са			
	and Registration Rules.		5	Branch code				151405									
						Account number			1 5 1			2 2 3 3 7			6		
ES			AYMEN	A	ccount	nun	nber		1	5 1	4	2 2	3				
PRES			IG / PAYMEN	Fee	e for		ı	R 30	-00			R 50-00	add)				
PRES	Signature of breeder		NKING / PAYMEN	Fee	e for 019	per	cat /	R 30 kitter	<b>)-00</b> n > 6 m	nonths	fc	R 50-00 or docume	add nts to	be poste			
PRES	Signature of breeder		BANKING / PAYMENT DETAILS	Ple	e for 019 ease us	per e you d sur	cat / ir bre	kitter eede e as	1-00 n > 6 m	nonths	fo	R 50-00	add nts to	be poste	ed		
PRES	Signature of breeder  Date signed and submitted		BANKING / PAYMEN	Ple C refe	e for 019 ease us ode an	per e you d sur on all	cat / ir bre nam payi	R 30 kitter eede e as men	7-00 n > 6 m r	nonths	fo nents egiste	R 50-00 or docume to be se	add nts to	be poste	ed		
PRES			BANKING / PAYMEN	Ple C refe	e for 019 ease us	per e you d sur on all	cat / ir bre nam payi	R 30 kitter eede e as men	7-00 n > 6 m r	Docun r	fo nents egiste	R 50-00 or docume to be se	add nts to	be poste	ed		
PRES			BANKING / PAYMEN	Ple C refe	e for 019 ease us ode an	per e you d sur on all	r cat / ir bre nam payi / Bes	kitter eede e as men	9-00 n > 6 m r	Docun r	fo nents egiste	R 50-00 or docume to be se	add nts to	be poste	ed		
	Date signed and submitted			Ple c refe	e for 019 ease us ode an	per e you d sur on all	r cat / ir bre nam payi / Bes	kitter eede e as men ster	9-00 n > 6 m r	Docun r	fo nents egiste	R 50-00 or docume to be se	add nts to	be poste	ed		
	Date signed and submitted  SURNAME		Title	Ple C refe	e for 019 ease us ode an	per e you d sur on all	r cat / ir bre nam payi / Bes	R 30 kitter eedee as men ster	9-00 n > 6 m r	Docun r Amou	fo nents egiste	R 50-00 or docume to be se	add nts to	be poste	ed		
	Date signed and submitted  SURNAME  FIRST NAME		Title E-mail	Ple c refe	e for 019 ease us ode an	per e you d sur on all	r cat / ir bre nam payi / Bes	R 30 kittereede as men	0-00 n > 6 m r tts,	Docum r Amou	fo nents egiste	R 50-00 or docume to be se	add nts to	be poste	ed		
	SURNAME FIRST NAME Physical address	Please tick appropriate box, if applicable	Title  E-mail  Postal co	Fee 20 Plet c refe e	e for 019 ease us ode an erence o	per e you d sur on all	r cat / r breen name pays	R 30 kitter eede e as men tter	l-00 rr rr peer	Docum r Amou	fc f	R 50-00 or docume to be seered posid R	) add nts to end v	be poste	N N		
NEW OWNER DETAILS	SURNAME FIRST NAME Physical address Cattery name (if applicable)	Please tick appropriate box, if applicable I have received a diet and caring instruction sheet, a completed veterinary issue signed Application of Transfer and a copy of the CFSA Code of Ethics for Breede I, the undersigned agree to abide by these requirements to the best of my abilit	Title  E-mail  Postal co  Cattery co	Fee 20 Plet C refee 6	e for 019 ease us ode an erence ( e.g. PUF	per e you d sur on all RR004	r cat // rr bre name paye   Bes	R 30 kitter eede e as men tter	l-00 rr rr peer	Docum r Amou	fc f	R 50-00 or docume to be seered posid R	) add nts to end v	be poste	N N		

This form is valid from January 2019 - old forms will not be accepted. Changes to the format will not be accepted.

All forms can be downloaded from the CFSA web, either in pdf format (complete manually) or Excel format (complete electronically).

CFSA WEB SITE: www.cfsa.co.za