

NSW Cat Fanciers' Association Inc.

(Member of the Co-ordinating Cat Council of Australia)

PO Box 379 ST MARYS NSW 1790 Phone: (02) 9834 6577 ABN 35 318 816 506

APPLICATION FOR REGISTRATION OF A BREEDER'S PREFIX - Fee: \$42.00

Selected Names in Order of Preference (please PRINT clearly):

1ST CHOICE: _____
2ND CHOICE: _____
3RD CHOICE: _____
4TH CHOICE: _____

Notes to assist you:

1. Do not leave any spaces between letters – a prefix MUST consist of one word only, of 12 letters or less.
2. Do not use Christian names (eg Betty, John), or numbers. Do not use hyphens, dashes, apostrophes etc.
3. The Association will not accept a prefix for registration which is the same as, or similar to, any prefix already registered.
4. If you intend to register the prefix as a Business Name under the Business Names Act 1962, you should first consult the conditions governing the suitability of such name. These conditions appear in full on the Business Names application form.
5. Select all names carefully, as prefixes will not be changed once they have been registered

PERSONS IN WHOSE NAMES PREFIX TO BE REGISTERED:

Title: First Name: Surname:

Title: First Name: Surname:

Address: Post Code:

I/We hereby apply for a Breeder's Prefix, having fulfilled the following conditions:

- Made application for membership of the NSW Cat Fanciers' Association
- Am a current financial member(s) of the NSW Cat Fanciers' Association Membership No:
- Own the following cat/s registered with the NSW Cat Fanciers' Association:

CAT'S FULL REGISTERED NAME	REGISTRATION NO.

Signature: Signature:.....

(Both signatures required if joint prefix is registered)

Date:

BEFORE COMPLETING, please note:

Any cat used for breeding must be registered in the same ownership as that of the prefix. Please therefore check NOW the registered ownership of any cat/s you may own, by checking carefully the Certificate of Registration.

Applicants will be notified in writing when prefix has been approved. If names submitted by you are not acceptable, it will be necessary for you to select further names for consideration.

A prefix maintenance fee must be paid each year with renewal of membership.

When completed, return the form together with the fee or direct deposit reference to:

NSW CFA
PO BOX 379
ST MARYS NSW 1790

Bank details: Commonwealth Bank
BSB: 062622
A/C: 10464356
Direct Deposit Receipt No: _____ Date Deposit Made: _____