



# Application to the Irish Kennel Club CLG for a licence for obedience/agility tests

May 2018

Fottrell House, Harold's Cross Bridge, Dublin D6W PF76

Telephone: (01) 453 3300. Fax: (01) 453 3237

E-Mail: info@ikc.ie Website: www.ikc.ie

**FEE €25.00**

Breed \_\_\_\_\_

Colour & Markings \_\_\_\_\_

Sex \_\_\_\_\_

Date of Birth \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Date Month Year

## NAME OF DOG

(1st Choice) \_\_\_\_\_

(2nd Choice) \_\_\_\_\_

Microchip No. (Bar code sticker) \_\_\_\_\_

### DECLARATION BY OWNER

I/We **Hereby AGREE** to abide by the decision of The Irish Kennel Club CLG, which shall be final, upon any question in relation to this dog and to the publication of any proceedings or decisions in reference thereto.

I/We agree to be bound by the Rules and Regulations and the Code of Ethics of THE IRISH KENNEL CLUB CLG.

I/ We agree that THE IRISH KENNEL CLUB CLG may release my/our contact details to an authorised third party under Schedule 1.2 of the Microchipping of Dogs Regulations 2015.

I/We **FURTHER AUTHORISE** THE IRISH KENNEL CLUB CLG. to record the information on this form on the Irish Kennel Club approved Dog Identification Database in accordance with Section 5 of the Microchipping of Dogs Regulations 2015.

The Irish Kennel Club will not provide your personal information to a third party unless obligated to do so as a legal requirement.

#### **PERSONAL WRITTEN SIGNATURE OF OWNER**

(state whether Mr., Mrs, or Miss)

(In the case of Joint Ownership each owner must sign personally)

Written Signature/s \_\_\_\_\_

Name/s (Capital Letters) \_\_\_\_\_

Address (Capital Letters) \_\_\_\_\_

Email \_\_\_\_\_

Date \_\_\_\_\_ Tel \_\_\_\_\_

### **FOR COMPLETION BY VETERINARY SURGEON/NURSE/IMPLANTERS:**

Name: \_\_\_\_\_

Your VCI Reg. Number: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_ Tel No: \_\_\_\_\_

Date Microchipped: \_\_\_\_\_

### **Microchipping of Dogs Regulations 2015**

The Irish Kennel Club CLG is authorised under Section 5 of the above regulations to operate a Dog Identification Database. On registration, the information on this form will be entered into the Dog Identification Database and the Irish Kennel Club will send to the Veterinary Practice/ Implanter a Registration Summary for their records. The Breeder, as the registered owner of the dogs, will be sent the Registration Certificates and a Registration Summary.

The Irish Kennel Club will not retain credit card information subsequent to processing payment.

#### **PAYMENT FEE €25**

RETURN THIS FORM COMPLETED WITH THE FEE TO THE IRISH KENNEL CLUB CLG.

Choose method of payment

A. BY CHEQUE or POSTAL/MONEY ORDER

I enclose my payment of € \_\_\_\_\_ made payable to The Irish kennel Club CLG.

B. BY CREDIT CARD

Please charge my

VISA

MASTERCARD

\_\_\_\_\_

AMOUNT

€

EXPIRY DATE OF CARD

\_\_\_\_ / \_\_\_\_

ISSUE NUMBER IF PRINTED ON CARD \_\_\_\_\_

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

**Credit Card Administration charge €1.50**

#### **FOR OFFICIAL USE ONLY**

Registration No. \_\_\_\_\_

Date of Registration \_\_\_\_\_

Received \_\_\_\_\_

Fee paid by \_\_\_\_\_

Checked by \_\_\_\_\_