



AUSTRALIAN NATIONAL KENNEL CONTROL

CERTIFICATE OF USE OF REGISTERED SEMEN

DETAILS OF DONOR DOG

Name of Dog _____

Semen Registration No. _____

Breed _____

Owner/s Name _____

Address _____

Membership No. _____

DECLARATION BY INSEMINATING VETERINARIAN

I hereby certify that on / / (date) the bitch identified to me as detailed hereunder was inseminated by me with Frozen / Chilled (*delete as appropriate*) semen from the above mentioned dog.

DETAILS OF INSEMINATED BITCH

Name of Bitch _____

Registration No. _____ Breed _____

Microchip/Tattoo No. (*if any*) _____

Owner/s Name _____

Address _____

Membership No. _____

No. of Straws Used _____

VETERINARIAN'S SIGNATURE

Signed _____

Name of Veterinarian _____

Address _____

_____ Date

Note: All semen MUST be registered within 18 months of the date of collection or importation.