



# AUSTRALIAN SHEPHERD CLUB OF AMERICA®

## LITTER REGISTRATION APPLICATION

Office Use Only	
Check No	_____
Amount	_____
PM Date	_____
Reg. No	_____

- Do not submit this form if Sire/Dam registration number is pending** unless the Individual Dog Registration Application for the Sire/Dam is included.
- ASCA is not responsible for obtaining signatures or payment and the form will be returned if not 100% complete with all signatures and payment on one application form.**
- All litter owners (Dam Owners/Lesseees) **MUST be current members** to register a litter. FULL member rates apply if any litter owner (dam owner/lessee) is a full member.
- All Sires and Dams **MUST be DNA Profiled** with ASCA's lab prior to registration of **FIRST** litter.
- Make Checks/ Money orders payable to ASCA, or fill in credit card information below.

Send Application To:  
**ASCA Business Office**  
 6091 E. State Hwy 21  
 Bryan TX, 77808  
 F: (979) 778-1898  
 E: [registrar@asca.org](mailto:registrar@asca.org)

Litter Registration Fees		
Litter Ages (months):	Full Members Pay	Service Members Pay
Litter Age 0-6	\$21.00	\$42.00
Litter Age 6-12	\$30.00	\$60.00
Litter Age 12-24	\$55.00	\$110.00
Litter Age 24+	\$110.00	\$220.00

Check here if you would like to have your litter expedited for an additional **\$75.00** fee. **All litter owners must be current and DNA results must be complete.**

### Section I – To be completed by Sire Owner

\_\_\_\_\_ ASCA Registered Name of Sire  
 \_\_\_\_\_ Sire's ASCA Registration #

\_\_\_\_\_ Name of owners of Sire (or Lessees) \*List all owners/lessees

I, the sire owner or lessee at the time of mating, hereby certify that the below named dam was mated to above named sire and that:  
 (Please check one) →  I witnessed the mating.  I did not witness the mating.

I (we) further certify that I was the owner, co-owner, or lessee of the sire at the time of mating.

Sire's Main Body Color
_____

DNA STATUS (REQUIRED)
<input type="checkbox"/> Complete <input type="checkbox"/> Pending
If DNA pending, litter will be put on hold until results arrive

\_\_\_\_\_ ALL Sire Owner/Lessee and Co-owner/lessee Signatures

\_\_\_\_\_ Date

\_\_\_\_\_ ALL Sire Owner/Lessee and Co-owner/lessee Signatures continued (additional space if needed)

\_\_\_\_\_ Date

### Section II – To be completed by Dam Owner

\_\_\_\_\_ Date(s) of Mating

M	M	D	D	Y	Y

**LITTER WHELPING DATE**

Dam's Main Body Color
_____

\_\_\_\_\_ ASCA Registered Name of Dam

\_\_\_\_\_ Dam's ASCA Registration #

\_\_\_\_\_ Names of Dam Owners/Lesseees - List ALL owners/lesseees (**Paperwork will be mailed to primary owner/lessee ONLY**)

DNA STATUS (REQUIRED)
<input type="checkbox"/> Complete <input type="checkbox"/> Pending
If DNA pending, litter will be put on hold until results arrive

\_\_\_\_\_ Address, City, State, Zip Code of **Primary Owner/Lessee** of Dam if changed

Member ID#'s of Litter Owners

\_\_\_\_\_ \*Primary owner Email (preferred method of contact)

\_\_\_\_\_ Phone #

### DAM OWNER(S): COMPLETE & SIGN REVERSE SIDE OF THIS FORM



--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

EXP: 

--	--	--	--

SEC CODE: 

--	--	--

Cardholder's Signature \_\_\_\_\_

Sire's ASCA Registration #

Dam's ASCA Registration #

Date of Whelping

## Section III - LIST ALL PUPPIES - LIVE AND OTHERWISE

Sample	Sex of Puppy	Color of Puppy	Trim Color of Puppy	Please mark this column if the pup died or was culled. If additional space is needed, attach a separate sheet containing this information.
	M=Male F=Female	BM=Blue Merle B=Black RM=Red Merle R=Red	WC = White/Copper W = White C = Copper NT = No Trim	
	M	RM	WC	
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				

X

ALL Dam/Litter Owners and Co-Owners signatures

Date

X

ALL Dam/Litter Co-Owners signatures cont'd (additional space if needed)

Date

I (we) testify that all data submitted is correct. I (we) understand that all applications become the property of ASCA. I further certify that I was the owner, co-owner, or lessee of the dam listed on this application on the date of birth of the litter and that this dam was mated only to the sire listed on this application. Should information in this application prove false, applicant will indemnify and defend ASCA and hold it harmless against any resulting loss. The lineage of your dog can be determined with certainty by DNA testing sponsored by ASCA. I (we) further understand that as an owner of an ASCA registered litter, I (we) agree to abide by the ASCA Articles of Incorporation, Bylaws, and rules of the ASCA Registry, Conformation, Obedience and Stock Dog Programs and to disciplinary action, if necessary, as determined by the ASCA Board of Directors. I hereby certify these dogs have not been registered as another breed. In addition, I will not register these dogs as another breed. I understand if I register these dogs as another breed, their ASCA registration will be revoked.

## MEMBERSHIP RENEWAL FORM FOR EXPIRED LITTER OWNERS –ATTACH ADDITIONAL MEMBERSHIP RENEWAL APPLICATIONS IF NEEDED

FULL MEMBERSHIP		JUNIOR MEMBERSHIP (Ages 8-17)	SERVICE MEMBERSHIP
<b>YEARLY</b> includes "Aussie Times", Lower registration fees, & Voting Privileges for 1 year (outside U.S., see postage requirements) <input type="checkbox"/> SINGLE \$50 (1 Adult) <input type="checkbox"/> DUAL \$75 (2 Adults-same household)	<b>LIFETIME</b> includes lower Registration Fees, Voting Privileges for life <input type="checkbox"/> No "Aussie Times" \$300 (Single) <input type="checkbox"/> No "Aussie Times" \$520 (Dual) <input type="checkbox"/> Add \$35 for 1 year subscription to "Aussie Times"	<b>Juniors pay Full Member Registration Fees</b> Parent name: _____ Junior Birth Date: _____ <input type="checkbox"/> No "Aussie Times" FREE <input type="checkbox"/> "Aussie Times" 1 yr subscription - \$35	Higher registration fees No "Aussie Times" <input type="checkbox"/> \$10 EACH OWNER/CO-OWNER WHO IS NOT A CURRENT MEMBER
<b>ADDITIONAL POSTAGE OPTION FOR AUSSIE TIMES</b>		<b>1ST CLASS</b>	<b>SURFACE</b>
USA		<input type="checkbox"/> \$25	N/A
CANADA		<input type="checkbox"/> \$25	<input type="checkbox"/> \$18
ALL OTHER COUNTRIES		<input type="checkbox"/> \$54	<input type="checkbox"/> \$24

Name #1 \_\_\_\_\_ Name #2 \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Country: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

I (We) agree to abide by the ASCA Articles of Incorporation, Bylaws, and all ASCA Rules and Regulations governing the ASCA® Registry and all other ASCA® programs.

#1 \_\_\_\_\_ #2 \_\_\_\_\_

SIGNATURES

 New Member Renewal Check here if you wish to obtain a copy of the ASCA® Bylaws