APPENZELLER MOUNTAIN DOG CLUB OF AMERICA APPLICATION FOR TRANSFER OF OWNERSHIP

Date of Application:

INSTRUCTIONS TO APPLICANT

This application is for the transfer of ownership of the dog as described and identified on this application. This application must be completed by the seller. When submitted, all applications become the property of the AMDCA. In the case of errors or omissions, this application will be returned to the seller(s) for correction. Signature(s) must be written in ink. The transfer fee is \$20.00 (US)

				DOG I	NFORMA	TION							
Full Name of Dog:								Call name:					
Litter Registration #:					D.O.B:				Sex:				
Color: Microchip #:					T				attoo #:				
SIRE:	l							<u> </u>					
Name:				Registration #:				D.O.B.					
Health Results:	Health Results: Hips:			Elbows:		Patella's:		Color:	Color:				
Owner:			I										
Last			First			М.	M.I.		Kennel Name				
Phone #:	Email:			_					Country:				
DAM:		-											
Name:	Name:			Registration #:				D.O.B.					
Health Results: Hips:			Elbows:			Patella's:		Color:	Color:				
Owner:													
	Last		First			M.I.			Kennel Name				
Phone #:		Email:							Country:				
			SEI	LLER 1	. / Curre	nt Owner							
Name:													
Last				First			M.I.		Kennel	Kennel Name			
Address:													
			Street Address						Apartmen	Apartment/Unit #			
City						State/Pro	vince	Zip/	Postal Code	Country			
Phone #:		Email:											
		S	ELLER	2 / Co	-Owner (if applica	ıble)						
Name:													
	Last		First	irst M.		M.I.		Kennel Name					
Phone #:		Email:											

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NEW OWNER (where Dog will be residing)										
Name:										
	Last	Fin	rst	M.I.		Kennel Name				
Address:										
		Street Addre		Apartment/Unit #						
	City			State/Province	Zip/Pos	Zip/Postal Code Countr				
Phone #:		Email:								
NEW OWNER 2 / Co-Owner (if applicable)										
Name:										
Last			First	N.	1.I.	Kennel Name				
Phone #:		Email:								
	_	RECO	OVERY PROGRA	ΔM						
Emergence	y Contact Name:									
Phone #:		Email:								
As the Selle	er, I certify that all of the	he information contained	in this application	is true and may be	verified u	pon request.				
Signature:	Se	ller 1		Date:						
	36	ner i								
Signature:	Se	ller 2		_ Date:						

SUBMIT APPLICATION and attachments TO:

Debbie Dales, AMDCA Registrar Email derocheappenzellers@gmail.com

or mail your completed application to AMDCA to:

Debbie Dales, 42095 Husband Road, Deroche, B.C. V0M 1G0 Canada

Please submit payment via Paypal to AMDCA Treasurer, Audrey Lyke, <u>audrey.lyke@gmail.com</u> or mail your cheque payable to AMDCA to:

Audrey Lyke, 3516 Hopkins Dr., Wilmington, DE 19808 USA.

To avoid delays in processing, please note that the payment is for 'Transfer of Ownership'.