

DOGS QUEENSLAND

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ARTIFICIAL INSEMINATION WITH FRESH SEMEN DECLARATION BY VETERINARY SURGEON

This document is to accompany any litter registration application where the litter was got by artificial insemination using fresh semen. The application must be completed by the inseminating veterinarian.

SEMEN DONOR INFORMATION:	
Pedigree Name of Donor Dog:	
Registration Number:	
Breed:	
Owner's Name:	
Owner's Address:	
	Post Code:

INSEMINATED BITCH INFORMATION:	
Pedigree Name of Inseminated Bitch:	
Registration Number:	
Breed:	
Owner's Name:	
Owner's Address:	
	Post Code:

Declaration to be signed by Veterinarian:

I, _____ from _____ clinic, hereby certify that on
____ / ____ / 20____, I inseminated _____
with fresh semen from the above dog.

Signature of Veterinary Surgeon: _____