



**APPLICATION FOR EKASA REGISTRATION OF MULTIPLE CANINES**

**(REGISTRATION DOCUMENTS MUST ACCOMPANY THIS FORM)**

Name of Kennel \_\_\_\_\_  
 Kennel Nr with EKASA \_\_\_\_\_  
 Breed \_\_\_\_\_

**DETAILS OF DOGS TO BE REGISTERED WITH EKASA**

	REGISTERED NAME	REGISTRATION NR	Sex		Colour	Breeding Restrictions	
			M	F		YES	NO
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							

**ORDER DETAILS**

**Declaration**

\_\_\_\_\_  
 FULL NAMES

\_\_\_\_\_  
 Signature

By my signature to this form or insertion of full name & surname, I/we understand and agree to conform and comply to the bylaws, policies, procedures, code of ethics and Rules and Regulations of EKASA.

**Bank Details**

EKASA  
 CAPITEC SAVINGS  
 BRANCH CODE: 470010  
 ACCOUNT NR: 137870964