

Please type or print **SECTION A – Birth Information**

Date of Birth \_\_\_\_\_ # of Living \_\_\_\_\_

Breed \_\_\_\_\_ Month/Day/Year \_\_\_\_\_ Females \_\_\_\_\_ Males \_\_\_\_\_

**SECTION B – Sire Information – To be completed by owner/lessee at time of mating.**

Registered Name of Sire \_\_\_\_\_

CFA Registration Number \_\_\_\_\_ Signature of Sire's Owner/Lessee\* \_\_\_\_\_

Owner/Lessee of Sire at Time of Mating \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State/Province/Country \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

**OPTIONAL \*Lease of Sire - Important: see new Lease section on reverse prior to completing.**

There are certain instances when a lease must be recorded with CFA prior to or in conjunction with a litter registration and this section will not apply. See lease section on reverse for details.

On the date of mating, this sire was leased to the person(s) listed above as lessee.

Signature of person REGISTERED with CFA as OWNER of the Sire \_\_\_\_\_

**SECTION C – Dam Information – To be completed by breeder of litter.**

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

CFA Registration Number \_\_\_\_\_ Signature of Breeder of Litter\* \_\_\_\_\_

Name of Breeder of Litter \_\_\_\_\_

Breeder's Address \_\_\_\_\_

City \_\_\_\_\_ State/Province/Country \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

Breeder's CFA Registered Cattery Name, if Applicable. \_\_\_\_\_ Breeder/Cattery # \_\_\_\_\_

I have recently moved. My previous zip code was: \_\_\_\_\_

Please provide your daytime phone #, in case we have any questions. This phone number will **NOT** be published. ( \_\_\_\_\_ )

**OPTIONAL \*Lease of Dam - Important: see new Lease section on reverse prior to completing.**

There are certain instances when a lease must be recorded with CFA prior to or in conjunction with a litter registration and this section will not apply. See lease section on reverse for details.

On the date of mating, this dam was leased to the person listed above as Breeder of Litter.

Signature of person REGISTERED with CFA as OWNER of the Dam \_\_\_\_\_

**OPTIONAL SECTION D – Litter Owner – Complete this section ONLY if a pregnant dam or dam with kitten(s) has been transferred to a NEW OWNER.**

Name of New Owner \_\_\_\_\_

New Owner's Address \_\_\_\_\_

City \_\_\_\_\_ State/Country/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_

New Owner's Cattery Name & Number \_\_\_\_\_ Signature of Owner of Litter \_\_\_\_\_

**This Box for Office Use Only**

**SECTION E – Kitten Registrations** (Complete this section **ONLY** to register **individual kittens**) (Enter 2 choices of cat names, and name & address of owner)

Name of Cat (1st Choice) – 35 character/space maximum \_\_\_\_\_

Name of Cat (2nd Choice) – 35 character/space maximum \_\_\_\_\_

Sex:  Male  Female  Neuter  Spay  Not for Breeding Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_

Coat Length:  Long  Short Other Characteristics (see reverse for specific info): \_\_\_\_\_ Date of Sale (month/day/year): \_\_\_\_\_

Owner Name(s) – 30 character/space maximum \_\_\_\_\_

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

City: \_\_\_\_\_ State/Country/Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Name of Cat (1st Choice) – 35 character/space maximum \_\_\_\_\_

Name of Cat (2nd Choice) – 35 character/space maximum \_\_\_\_\_

Sex:  Male  Female  Neuter  Spay  Not for Breeding Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_

Coat Length:  Long  Short Other Characteristics (see reverse for specific info): \_\_\_\_\_ Date of Sale (month/day/year): \_\_\_\_\_

Owner Name(s) – 30 character/space maximum \_\_\_\_\_

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

City: \_\_\_\_\_ State/Country/Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_

Name of Cat (1st Choice) – 35 character/space maximum \_\_\_\_\_

Name of Cat (2nd Choice) – 35 character/space maximum \_\_\_\_\_

Sex:  Male  Female  Neuter  Spay  Not for Breeding Color: \_\_\_\_\_ Eye Color: \_\_\_\_\_

Coat Length:  Long  Short Other Characteristics (see reverse for specific info): \_\_\_\_\_ Date of Sale (month/day/year): \_\_\_\_\_

Owner Name(s) – 30 character/space maximum \_\_\_\_\_

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

City: \_\_\_\_\_ State/Country/Province: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_