

United States Rottweiler Club

Dog Registration Application

All information must be typed or printed neatly

A copy of the dog's Registration from AKC, CKC, ADRK or other FCI Member Kennel Club MUST accompany this application for USRC registration. Copies of USRC recognized titles, hip ratings and other certifications listed below not already on file with the registry must be submitted with this application or they will not appear on the USRC Registration Certificate.

Name of Dog							Male	Date of B	irth	Country of Birth	
							Female				
Recognized Working or Show Titles O						OFA#	DFA# or HD Rating & Country				
AKC Registration #	# Othe	Other Registration #				Other Health Certification # (CERF, Elbows, etc.)					
Name of Breeder Name			ne of Importer				Date of Import				
			·								
Sire Information:											
Name of Sire U				:	AKC Reg.	#	ADRK Reg. #			er Reg. #	
								_		J	
Recognized Working or Show Titles					OFA#, GDC# or			Rating & Co	ountry		
Noodynizod Working of Griow Thiod							.,		,		
Dam Information: Name of Dam			USRC Reg. #			AKC Reg. # AE		ADRK Reg. #		er Reg. #	
Name of Barn			Corto riog. #		/ into riog.		,		Guidi riogi "		
Recognized Working or Show Titles						OΕΔ÷	# GDC# or HD	D Rating & Country			
Recognized Working of Show Titles					OFA#, GDC			7# OF THE Rating & Country			
Owner Information: Owner Co-Owner											
Owner											
Address				City			State		Zip	1	
Phone Fax						E-Mail		I			
Dog Identification Statement:											
All dogs registered with USRC are required to have positive identification. The tattoo or microchip MUST be verified by a Licensed Veterinarian,											
USRC Regional Director, or a USRC Member assigned to verify by the Regional Director or the Office Administrator. Verification of the dog's identification must be submitted to the Registrar before the registration certificate will be issued.											
I certify that I have examined the tattoo or microchip of this dog/bitch.											
Tattoo or Microchip Number Location of Tattoo (circle one)											
☐ Microchip		RE-Right	Ear	LE-L	eft Ear	IRT-	Inner Right	Γhigh	ILT-In	ner Left Thigh	
Signature & Date							Phone				
Payment Information:											
☐I have enclosed a check or mo	ney order payabl	le to USR	С	Re	gistration	\$15	□ R	egistratio	n & Pe	edigree \$45	
☐ I have made payment via Paypal to officeadmin@usrconline.org (PREFERRED), include paypal receipt with application											
Charge My	sterCard										
Expiration Date:	CCV:				Date Pro	cessed	Inv	Auth Nr			
I certify that all information on this application is true and correct and that I am the Owner/Co-Owner of the dog on this application. I understand that any misrepresentation on this application is cause for revocation of the USRC dog registration and may result in the											
loss of all USRC privileges which c							5 5				
	_		_								
Signature of Owner Date				Signature of Co-Owner					[Date	
Mail Application. USRC Off	ication. USRC Office Administrator, Liz Crawley						For Office Use 08/14				