# UNITED ALL BREED REGISTRY®
## LITTER REGISTRATION APPLICATION

**BREED:_____MALES:_____ FEMALES:____ DATE OF BIRTH:____ - ____ - ____**

**NAME OF SIRE:_____REG. # _____**

**PLEASE NOTE: If this sire is not registered with UABR, please enclose an addtl. $20 and a copy of his current registration.**

OWNER OR LESSEE OF SIRE ON DATE OF MATING: _____

ADDRESS: _____

CITY:_____ STATE:_____ ZIP: _____

PHONE: (_____)_____CELL: (_____)_____

EMAIL ADDRESS: _____

SIGNATURE OF SIRE OWNER OR LESSEE**: _____

**NAME OF DAM:_____REG. # _____**

**PLEASE NOTE: If this dam is not registered with UABR, please enclose an addtl. $20 and a copy of her current registration.**

OWNER OR LESSEE OF DAM ON DATE OF MATING: _____

ADDRESS: _____

CITY:_____ STATE:_____ ZIP: _____

PHONE: (_____)_____CELL: (_____)_____

EMAIL ADDRESS: _____

SIGNATURE OF DAM OWNER OR LESSEE**: _____

**IF OWNERSHIP OR LEASE OF DAM CHANGED AFTER MATING AND BEFORE BIRTH, AND LITTER PAPERS ARE TO BE SENT TO NEW OWNER OR LESSEE, FILL OUT THIS SECTION.**

NAME OF OWNER OR LESSEE ON DATE OF BIRTH:_____

ADDRESS: _____

CITY: _____STATE:_____ ZIP: _____

PHONE: _____ CELL: _____

SIGNATURE OF DAM OWNER OR LESSEE**: _____

**Signature warrants that you subscribe to UNITED breeder code of ethics and information is valid and not misleading. Irrevocably agrees that UNITED is not responsible if misleading information was given. When completed and submitted, this application becomes the property of UNITED. We reserve the right to correct or revoke for cause any registration issued. Any misrepresentation on this application is cause for cancellation and may result in loss of all privileges for those who violate the integrity of this application. UNITED is not responsible for any erroneous information, intended or not, on this application. ***If you have 5 or more breeding females, please call us about our discounted breeder rates on sire and dam registration.***

**Send or Fax your completed application and payment of $10.00 (more for sire/dam if necessary) to:**

**United All Breed Registry, PO Box 308, Caulfield, MO 65626 phone 417-284-3001 fax 417-284-7877**

If paying by credit card, fill in card number, expiration date and sign.

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Exp. Date: ____/____ Signature: _____ **UnitedRegistry.com**