



# S.A.C.B.R Breeder Kennel Affix Application

NB: a male and female dog must be registered with application

## Main Applicant/Breeder Information

Name & Surname										Postal or City Address & Suburb & Area Code Required									
Date					Cell Number:					E-Mail Address									
/ / 2 0																			
New Kennel Affix name requested:										Applicant SA I.D Number:									
Canine breed/s intended to breed with:										SACBR OFFICE USE ONLY					Signature of Applicant				

## Co-Applicant/Breeder Information (Not Required / only if two breeders intend to share one affix name)

NEW Kennel Affix Name& Surname										Postal or City Address & Suburb & Area Code Required									
Date					Cell Number:					E-Mail Address									
/ / 2 0																			
										Co-Applicant SA I.D Number:									
Relationship to Main Applicant										Signature of Applicant									

Breeder Kennel Affix Fee: **R300.00** - No annual fees required - via email only - pdf format applies

**CAPITEC - Acc: 1712899153 - PJ Lesage (SACBR) Savings Account** - E-Mail: [sacbr@sacbr.co.za](mailto:sacbr@sacbr.co.za), [www.sacbr.co.za](http://www.sacbr.co.za) - Fax: 086 541 1760, Tel: 074 129 6137