

**APPLICATION FOR REGISTRATION IN THE STUD BOOK OF  
THE AMERICAN BORDER COLLIE ASSOCIATION**  
ABCA • P.O. Box 535 • Pine Mountain, GA 31822

PLEASE PRINT

|  |       |        |                     |        |
|--|-------|--------|---------------------|--------|
| BREEDER NAME (OWNER(S) OF DAM AT TIME OF WHELPING) <i>Must be an ABCA Member</i> |       |        | BIRTHDATE OF LITTER |        |
|  |       |        | MTH                 | DATE   |
| ADDRESS  |       |        | TOTAL IN LITTER     |        |
| CITY   | STATE | ZIP    | #FEMALES            | #MALES |
| TELEPHONE:   |       | EMAIL: |                     |        |

|   |             |                         |      |    |
|---|-------------|-------------------------|------|----|
| SIRE NAME   | SIRE NUMBER | MATING DATE             |      |    |
|   |             | MTH                     | DATE | YR |
| AS OWNER OF STUD DOG, I CERTIFY THIS SIRE WAS MATED TO THE DAM NAMED BELOW ON THE ABOVE MATING DATE, AND THAT HE HAS NOT BEEN AWARDED THE TITLE OF CONFORMATION CHAMPION. |             |                         |      |    |
| SIRE OWNER NAME (PLEASE PRINT)  |             | SIGNATURE OF SIRE OWNER |      |    |
|   |             | X_____                  |      |    |
| CO-OWNER NAME (PLEASE PRINT)  |             | SIGNATURE OF CO-OWNER   |      |    |
|   |             | X_____                  |      |    |

|   |                        |
|---|------------------------|
| DAM NAME  | DAM NUMBER             |
| AS BREEDER/OWNER OF DAM, I CERTIFY THE ABOVE PARTICULARS AND BREEDING ARE CORRECT AND THE DAM HAS NOT BEEN AWARDED THE TITLE OF CONFORMATION CHAMPION. I ALSO CERTIFY THAT THE DOG(S) FOR WHICH REGISTRATION IS SOUGHT HAVE NOT BEEN AWARDED A CONFORMATION CHAMPIONSHIP BY ANY REGISTRY. |                        |
| DAM OWNER NAME (PLEASE PRINT)   | SIGNATURE OF DAM OWNER |
|   | X_____                 |
| CO-OWNER NAME (PLEASE PRINT)  | SIGNATURE OF CO-OWNER  |
|   | X_____                 |

| SERVICE  | FEE (U.S. Dollars) |
|--|--------------------|
| <b>Annual Membership</b>   | \$15.00            |
| <b>Lifetime Membership</b> (Individual Only)                                       | \$150.00           |
| <b>Registration for each pup/dog:</b>  |                    |
| Before one year from date of birth   | \$15.00            |
| Over 1 year but less than 2 years  | \$30.00            |
| Over two years (DNA test required for dog & both parents)<br>(U.C. Davis accepted) | \$45.00            |

| SERVICE   | FEE (U.S. Dollars) |
|---|--------------------|
| <b>Transfer of Ownership</b> (Send original certificate)  | \$15.00            |
| <b>Miscellaneous:</b>   |                    |
| Replacement certificate or correction   | \$10.00            |
| OFA Designation (Copy of HIP Certification required)<br>(OFA and Cornell Hip accepted)                                | \$5.00             |
| CEA Designation (Copy of CEA DNA results required)<br>(Gene Check, Paw Print Genetics and Optimal Selection accepted) | \$5.00             |
| American Border Collie Association Decals   | \$1.00             |

|                                 |                               |                                     |                                   |           |                   |
|---------------------------------|-------------------------------|-------------------------------------|-----------------------------------|-----------|-------------------|
| Credit card#                    | <input type="checkbox"/> Visa | <input type="checkbox"/> Mastercard | <input type="checkbox"/> Discover | Exp. Date | CVS/Security Code |
| □ □ □ □ - □ □ □ □ - □ □ □ □ □ □ |                               |                                     |                                   | □ □ - □ □ | □ □ □ □           |
| Name as it appears on card      |                               |                                     | Signature                         |           |                   |
|                                 |                               |                                     | X_____                            |           |                   |

**Rules**

1. Must be a member in good standing with the Association to register dogs or puppies.
2. Only the Breeder, Owner of the Dam at whelping, may submit this application and payment
3. Any member who submits a registration application containing falsified information is subject to disciplinary action, including the loss of registration privileges.
4. Copies of Sire's and/or Dam's registration papers must be included if not currently registered with ABCA. ISDS not previously submitted, send ISDS original certificate and ISDS pedigree. If CBCA, SASA, AWBC, send copy of certificate.

5. Payment due with submittal. We accept Check, Money Order, Visa, Mastercard or Discover (U.S. Funds). Declined checks or cards subject to fee.
6. An incomplete or illegible application will be returned. Please print in blue or black ink.

Additional information can be found on our website [www.americanbordercollie.org](http://www.americanbordercollie.org)

**PLEASE PRINT AND COMPLETE ALL REQUESTED INFORMATION**

| Office Use Only | DOG'S NAME<br>(Maximum of 14 Spaces) | SEX<br>Male<br>Female | COAT<br>Rough<br>Medium<br>Smooth | SIZE<br>Small<br>Medium<br>Large | COLOR<br>Black<br>White<br>Tan, Tri<br>Etc. | MARKING<br>such as<br>collar, blaze, legs,<br>freckles, etc. | OWNER(S)' NAME & ADDRESS |       |     |
|-----------------|--------------------------------------|-----------------------|-----------------------------------|----------------------------------|---|--|--------------------------|-------|-----|
|                 |                                      |                       |                                   |                                  |   |  | NAME                     |       |     |
|                 |                                      |                       |                                   |                                  |   |  | ADDRESS                  |       |     |
|                 |                                      |                       |                                   |                                  |   |  | CITY                     | STATE | ZIP |
|                 |                                      |                       |                                   |                                  |   |  | NAME                     |       |     |
|                 |                                      |                       |                                   |                                  |   |  | ADDRESS                  |       |     |
|                 |                                      |                       |                                   |                                  |   |  | CITY                     | STATE | ZIP |
|                 |                                      |                       |                                   |                                  |   |  | NAME                     |       |     |
|                 |                                      |                       |                                   |                                  |   |  | ADDRESS                  |       |     |
|                 |                                      |                       |                                   |                                  |   |  | CITY                     | STATE | ZIP |
|                 |                                      |                       |                                   |                                  |   |  | NAME                     |       |     |
|                 |                                      |                       |                                   |                                  |   |  | ADDRESS                  |       |     |
|                 |                                      |                       |                                   |                                  |   |  | CITY                     | STATE | ZIP |
|                 |                                      |                       |                                   |                                  |   |  | NAME                     |       |     |
|                 |                                      |                       |                                   |                                  |   |  | ADDRESS                  |       |     |
|                 |                                      |                       |                                   |                                  |   |  | CITY                     | STATE | ZIP |
|                 |                                      |                       |                                   |                                  |   |  | NAME                     |       |     |
|                 |                                      |                       |                                   |                                  |   |  | ADDRESS                  |       |     |
|                 |                                      |                       |                                   |                                  |   |  | CITY                     | STATE | ZIP |