

PARTNERSHIP AGREEMENT & NOTIFICATION FORM

All items, apart from item J., MUST be completed. Item J. is optional.

A. Details of Dog

Registered (pedigree) name: _____

Microchip number: _____ **Date whelped:** ____ / ____ / 20____

Registration status (Tick one): **General register** **Limited register** **Associate register**

Breeder's Name: _____

Breeder's membership number: _____

Sire: _____ **Dam:** _____

Sire's registration number: _____ **Dam's registration number:** _____

B. First Partner(s)

Name: _____ **Membership number:** _____

Address: _____ **Post Code:** _____

C. Second Partner(s)

Name: _____ **Membership number:** _____

Address: _____ **Post Code:** _____

D. Third Partner(s)

Name: _____ **Membership number:** _____

Address: _____ **Post Code:** _____

E. Fourth Partner(s)

Name: _____ **Membership number:** _____

Address: _____ **Post Code:** _____

F. Purpose of Partnership - tick all that apply

- Conformation showing**
- Obedience / agility trials (and / or training)**
- Breeding**
- Pet / companion dog**
- Other (please specify):**

G. Ownership of Dog

If this partnership agreement is terminated, the dog must be transferred. Ownership of the dog also entails some legal responsibilities. If you do not understand the legal implications of ownership, you should consult a competent legal adviser:

- the dog will be owned by the first partner(s)**
- the dog will be owned by the second partner(s)**
- the dog will be owned by the third partner(s)**
- the dog will be owned by the fourth partner(s)**
- the dog will be owned jointly by the first partner(s) as to _____ %, the second partner(s) as to _____ %, the third partner(s) as to _____ % and the fourth partner(s) as to _____ %.**

H. Custodian of Dog - party with whom dog will ordinarily be domiciled]

- The first partner(s), at the address shown in item B.**
- The second partner(s), at the address shown in item C.**
- The third partner(s), at the address shown in item D.**
- The fourth partner(s), at the address shown in item E.**
- Shared custody between the first partner(s), second partner(s), third partner(s) and fourth partner(s)**
- Other – specify name & address:**

I. Responsibility and Cost Sharing

The custodian is primarily responsible for ensuring that the dog has appropriate accommodation, shelter, food, water, veterinary treatment and health care. Unless otherwise specified, all costs are the responsibility of the custodian. In cases of joint custody, unless otherwise specified, each partner is responsible for all costs while the dog is in the partner's custody. Responsibility and cost-sharing arrangements between partners do not affect their obligation to protect the dog's welfare.

Food

- 1st partner(s) – _____ %
- 2nd partner(s) – _____ %
- 3rd partner(s) – _____ %
- 4th partner(s) – _____ %

Veterinary and Health Care

- 1st partner(s) – _____ %
- 2nd partner(s) – _____ %
- 3rd partner(s) – _____ %
- 4th partner(s) – _____ %

Transportation

- 1st partner(s) – _____ %
- 2nd partner(s) – _____ %
- 3rd partner(s) – _____ %
- 4th partner(s) – _____ %

Entry Fees

- 1st partner(s) – _____ %
- 2nd partner(s) – _____ %
- 3rd partner(s) – _____ %
- 4th partner(s) – _____ %

Insurance

- 1st partner(s) – _____ %
- 2nd partner(s) – _____ %
- 3rd partner(s) – _____ %
- 4th partner(s) – _____ %

Other (specify):

- 1st partner(s) – _____ %
- 2nd partner(s) – _____ %
- 3rd partner(s) – _____ %
- 4th partner(s) – _____ %

J. Special Conditions

Any special conditions applying to the partnership may be inserted here. If there is insufficient space, special conditions may be set out on a separate page, signed by all parties, and attached to this notification. In particular, if the dog is to be used for breeding, provision should be made regarding the costs associated with breeding, sale of puppies and sharing the progeny or proceeds of sale.

K. Accompanying Documentation and Payment

Please check the following:

- this notification must be accompanied by the ORIGINAL Certificate of Registration
- this notification must be accompanied by the prescribed fee using the attached credit card payment form.

Signature of First partner(s): _____

Signature of Second partner(s): _____

Signature of Third partner(s): _____

Signature of Fourth partner(s): _____

Date: ____ / ____ / 20____

Original: Dogs Qld	Copy: First Partner(s)	Copy: Second Partner(s)
Copy: Third Partner	Copy: Fourth Partner	