



THE INTERNATIONAL CAT ASSOCIATION, INC.

LITTER REGISTRATION



PLEASE READ INSTRUCTIONS ON REVERSE SIDE BEFORE COMPLETING APPLICATION.

SECTION A: DATA					
BREED:	DATE OF BIRTH			NUMBER OF LIVING	
	MONTH	DAY	YEAR	MALES	FEMALE

SECTION B: SIRE (TICA Sire and Dam, \$10 MEM / \$12 NON-MEM)		
BREED	REGISTERED NAME OF SIRE	
REGISTRATION NUMBER	COLOR	
OWNER/LESSEE(S) OF SIRE AT TIME OF MATING		
STREET ADDRESS <input type="checkbox"/> CHECK IF NEW		
CITY	ST/COUNTRY	ZIP CODE
PHONE	EMAIL	
SIGNATURE OF OWNER/LESSEE(S) AT TIME OF MATING I hereby certify the above to be true and correct		

SECTION C: DAM (TICA Dam only, \$13 MEM / \$15 NON-MEM)		
BREED	REGISTERED NAME OF DAM	
REGISTRATION NUMBER	COLOR	
OWNER/LESSEE(S) OF DAM AT TIME OF MATING		
STREET ADDRESS <input type="checkbox"/> CHECK IF NEW		
CITY	ST/COUNTRY	ZIP CODE
PHONE	EMAIL	
SIGNATURE OF OWNER/LESSEE(S) AT TIME OF MATING I hereby certify the above to be true and correct		
TICA CATTERY NAME		

All blue slips will be mailed to breeder (owner of dam on record at time of mating) unless the Executive Office is notified in writing.

SECTION D:	SECTION E: REGISTER INDIVIDUAL KITTENS (\$10 EA, MEM/\$12 EA NON-MEM)	
① SEX ID:	FIRST NAME CHOICE	<input type="checkbox"/> NFB
COLOR		<input type="checkbox"/> NFS
		<input type="checkbox"/> NEFCC
EYE COLOR	OWNER'S NAME (S)	
STD NSTD LH SH	OWNER'S ADDRESS	
	CITY	ST/COUNTRY
		ZIP CODE
② SEX ID:	FIRST NAME CHOICE	<input type="checkbox"/> NFB
COLOR		<input type="checkbox"/> NFS
		<input type="checkbox"/> NEFCC
EYE COLOR	OWNER'S NAME (S)	
STD NSTD LH SH	OWNER'S ADDRESS	
	CITY	ST/COUNTRY
		ZIP CODE
③ SEX ID:	FIRST NAME CHOICE	<input type="checkbox"/> NFB
COLOR		<input type="checkbox"/> NFS
		<input type="checkbox"/> NEFCC
EYE COLOR	OWNER'S NAME (S)	
STD NSTD LH SH	OWNER'S ADDRESS	
	CITY	ST/COUNTRY
		ZIP CODE
④ SEX ID:	FIRST NAME CHOICE	<input type="checkbox"/> NFB
COLOR		<input type="checkbox"/> NFS
		<input type="checkbox"/> NEFCC
EYE COLOR	OWNER'S NAME (S)	
STD NSTD LH SH	OWNER'S ADDRESS	
	CITY	ST/COUNTRY
		ZIP CODE
⑤ SEX ID:	FIRST NAME CHOICE	<input type="checkbox"/> NFB
COLOR		<input type="checkbox"/> NFS
		<input type="checkbox"/> NEFCC
EYE COLOR	OWNER'S NAME (S)	
STD NSTD LH SH	OWNER'S ADDRESS	
	CITY	ST/COUNTRY
		ZIP CODE
⑥ SEX ID:	FIRST NAME CHOICE	<input type="checkbox"/> NFB
COLOR		<input type="checkbox"/> NFS
		<input type="checkbox"/> NEFCC
EYE COLOR	OWNER'S NAME (S)	
STD NSTD LH SH	OWNER'S ADDRESS	
	CITY	ST/COUNTRY
		ZIP CODE