



INDIVIDUAL CHANGE OF OWNERSHIP / DETAILS FORM

MICROCHIP NUMBER (10 or 15 digits) _____

I WISH TO (Please tick appropriate box) UPDATE MY DETAILS (No charge) CHANGE OF OWNERSHIP
 Please allow 14 days for your change to be processed, providing paperwork is **completed in full**
FORMS CAN BE EMAILED, FAXED OR POSTED (see details below)

Certificates can be printed online for FREE at www.aar.org.au
Please provide an email address for immediate notification of transfer
 or tick the box if you would like the notification to be posted

NEW OWNER DETAILS OR UPDATED INFORMATION

Title: _____ First Name: _____ Surname: _____

Residential Address: _____

Suburb/City: _____ State: _____ Postcode: _____

Full Postal Address (if different to above): _____

Local Council: _____ Phone/Internet Password: _____

Telephone: () _____ Mobile: _____

EMAIL ADDRESS (please supply): _____

Alternate Contact Name: _____ Telephone: () _____

Signature of **New** Owner: _____

PREVIOUS OWNER(S) DECLARATION

THIS SECTION MUST BE COMPLETED OR PROCESSING WILL BE DELAYED

I..... (print name of Previous Owner/s) hereby; (i) certify that the information presented within this Form is true and correct to the best of my knowledge, (ii) I provide permission for the Change of Ownership as requested by the New Owner; and (iii) I hold the AAR exempt from any liability in the event of any loss from any cause whatsoever, whether it be in implied or express form.

Signature(s) of Previous Owner(s): _____ / _____ **OR** Signed Statutory Declaration
 * (excluding VIC & QLD - see below)

* (VIC / QLD – Statutory Declarations are not acceptable if the previous owner resides in these states. Where a signature cannot be obtained from the new owner, AAR must contact the previous registered owner in writing on your behalf. Please allow up to **4 weeks** for processing)

PET DETAILS

Animal Name: _____ Species: _____ Breed: _____

Sex: M / F De-sexed: Y / N Date of Birth: _____ Colour: _____

PAYMENT DETAILS FOR CHANGE OF OWNERSHIP

A Cheque/Money Order is attached for **AUD\$12.00** OR Debit my credit card for **AUD\$12.00** (Do **NOT** send cash)
 Please make cheque/money order payable to AAR
 Note: The transaction will appear on your bank statement as the **Royal Agricultural Society of NSW**

Cheque/Money Order MasterCard Visa

Card Number _____ / _____ / _____ / _____ Expiry _____ / _____

Card holder Name: _____ CCV Code: _____

Card holder Signature: _____ Card holder phone no: _____

PRIVACY STATEMENT: Financial Information provided by you on this form is to be used solely for the purpose of processing and arranging payment, this information will remain confidential at all times except for disclosure which you have consented to or which is required by law. Other information, personal or otherwise provided by you above is used by the AAR (a division of the Royal Agricultural Society of NSW ("RAS") ABN 69 793 644 351) to administer this Form, for archival purposes or as required by law. Your details will be handled in accordance with the RAS of NSW Privacy Policy, a copy of which is available at <http://www.aar.org.au>.