Australasian	INDIVIDUAL CHA	NGE OF OWNERSHIP
Registry		Locked Bag 4317, Sydney Olympic Park NSW 2127 Ph: 02 9704 1450
$\geq$	Save time & money, go online. Online Change of Ownership available at <u>www.aar.org.au</u>	email: <u>help@aar.org.au</u> web: aar.org.au
	Allow up to 15 days for processing.	Z

Please allow up to 4 weeks for your change to be processed, providing paperwork is **completed in full.** FORMS CAN BE EMAILED OR POSTED (see details above)

NEW OWNER DETAILS (must be 18 years or older)						
Title:	First Name:		Surname:			
Resident	tial Address:					
Suburb/0	City:		State:	Postcode:		
Full Post	al Address (if different to al	oove):				
Telephor	ne: ( )		Mobile:			
Email A	ddress (please supply):					
* required in	n Victoria.	y. No authority is given to update informatio		)		
By ticking	g the below boxes, I/we:					
	onfirm that I/we are the owr the best of my knowledge:		w and all information p	rovided on this form is true and correct		
□ <u>(r</u> in	not recommended) do not formation for the purposes	consent to the AAR providing auth of reuniting me with my animal. Tio	orised users (including cking this box may dela	vets, councils and rescues) with this ay in the recovery of your animal.		
Signatu	re of New Owner:			Date: / /		
		PREVIOUS OWNER(S)	DECLARATION			
information requested	on presented within this Form is	true and correct to the best of my know	wledge, (ii) I provide perm	vious Owner/s) hereby; (i) certify that the nission for the Change of Ownership as om any cause whatsoever, whether it be in		
Signatu	re(s) of Previous Owner(s	)://		Date: / /		
		from the previous owner(s), AAR will c ing, providing paperwork is completed		ered owner(s) in writing on your behalf.		
		PET DETA	AILS			
Animal's	New Name:	Species:	Bree	d:		
Sex: M / (please circ		Date of Birth: / / /	Colour:	Date of Implant: / / /		
	PAY	IENT DETAILS FOR CH	ANGE OF OWNE	RSHIP		
	A Cheque/Money Order is	attached for AUD\$20.00 OR debit	my credit card for AUI	<b>D\$20.00</b> (Do <b>NOT</b> send cash)		

Please make cheque/money order payable to AAR Note: The transaction will appear on your bank statement as AAR Australia

Please ensure you have sufficient funds in your account to avoid processing delays

	□ Cheque/Money Order	□ Maste	erCard	□ Visa			
Card Number	//	_/	/		Expiry	_/	
Cardholder Name:	Cardholder Signature:			Cardholde	r 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 aar.org.au