**c** complete litter record

|  |  |
| --- | --- |
| Member Name |  |
| Address |  |
| Contact Number |  |
| Prefix |  |
| Membership Number |  |
| Breed |  |
| PER Source Number |  |

LITTER PARENTS DETAILS

**Sire:**

|  |  |  |  |
| --- | --- | --- | --- |
| Registered Name |  | | |
| Microchip # |  | Breed |  |
| Registration # |  | Date of Birth |  |
| Colour |  | | |

**Dam:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Registered Name |  | | | |
| Microchip # |  | Breed |  | |
| Registration # |  | Date of Birth |  | |
| Colour |  | Litter Number | |  |

|  |  |
| --- | --- |
| Mating Date |  |
| Comments on queen during gestation – feeding, worming, activity, discharge etc |  |

BIRTHING RECORD

**Date first kitten born: Time born:\_\_\_\_\_\_\_\_\_ Division of sexes:**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Kitten # | Time | Sex | Color | Markings | Placenta | Time between | Presentation | Weight | Comments |
| 1 |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |  |

LITTER DETAILS

|  |  |  |  |
| --- | --- | --- | --- |
| Number of females in the litter |  | Number of males in the litter |  |
| Number of live births in the litter |  | Number of stillborns in the litter |  |
| Describe any birth complications | | | |
|  | | | |

LITTER WEIGHT RECORD

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Kitten # | Birth | Day 1 | Day 2 | Day 3 | Day 4 | Day 5 | Day 6 | Day 7 | Day 8 | Day 9 | Day 10 | Day 11 | Day 12 | Day 13 |
| 1 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 3 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 4 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 5 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 6 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 7 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 8 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 9 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 10 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

|  |
| --- |
| Comments (including feeding regime for queen) |
|  | |

LITTER WEIGHT RECORD/DATES WORMED/VACCINATED/MICROCHIPPED

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Kitten # | 2 weeks | 3 weeks | 4 weeks | 6 weeks | 8 weeks | 10 weeks | 12 weeks |
| 1 |  |  |  |  |  |  | Chip # |
| 2 |  |  |  |  |  |  | Chip # |
| 3 |  |  |  |  |  |  | Chip # |
| 4 |  |  |  |  |  |  | Chip # |
| 5 |  |  |  |  |  |  | Chip # |
| 6 |  |  |  |  |  |  | Chip # |
| 7 |  |  |  |  |  |  | Chip # |
| 8 |  |  |  |  |  |  | Chip # |
| 9 |  |  |  |  |  |  | Chip # |
| 10 |  |  |  |  |  |  | Chip # |

|  |
| --- |
| Comments (including weaning regime and food, worming and parasite prevention brand and type of vaccination |
|  | |

GENERAL HEALTH HISTORY OF LITTER (MUST BE ACCOMPANIED BY A COPY OF ANY VETERINARY TREATMENT RECORD)

|  |  |  |
| --- | --- | --- |
| **Date** | **Description of Illness** | **Treatment** |
| / / |  |  |
| / / |  |  |
| / / |  |  |
| / / |  |  |
| / / |  |  |

KITTEN NEW HOME DETAILS (THERE MUST BE A FORM COMPLETED FOR EVERY KITTEN THAT LEAVES THE BREEDER)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Registered Name |  | | | Breed |  |
| Registration # |  | Gender |  | Colour |  |
| Microchip # |  | | | Date of Birth |  |

**New owner**

|  |  |  |
| --- | --- | --- |
| Name |  | |
| Residential address where kitten will live |  | |
| Contact Number |  | |
| Municipal Council |  | |
| Microchip form transfer signed? 🞏 Yes 🞏 No | | Microchip form transfer lodged? 🞏 Yes 🞏 No |
| Sales contract signed and given to new owner? 🞏 Yes 🞏 No | | Health Certificate Given to New Owner? 🞏 Yes 🞏 No |

*Note: Copy of microchip transfer form and signed Sales Contract should be attached to this record*

**Return Record**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Registered Name |  | | | Breed |  |
| Registration # |  | Gender |  | Colour |  |
| Microchip # |  | | | Date of Birth |  |
| Microchip form transfer signed? | 🞏 Yes 🞏 No  Date: \_\_\_/\_\_\_/\_\_\_\_ | Microchip form transfer lodged? | | | 🞏 Yes 🞏 No  Date: \_\_\_/\_\_\_/\_\_\_\_ |
| Return reason | | | | | |
|  | | | | | |