



**CAT ASSOCIATION of TASMANIA INC.**  
**APPLICATION FOR EXPERIMENTAL LICENCE**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Ph: \_\_\_\_\_

C.A.T. Membership No.: \_\_\_\_\_

Date of birth of first litter bred by you: \_\_\_\_/\_\_\_\_/\_\_\_\_

Registration No. of first litter bred by you: \_\_\_\_\_

(The minimum requirement is three (3) years breeding experience. If this commenced with another Council/Control, please provide evidence of the date of birth of your first litter)

1. All applicants should be familiar with, and comply with C.A.T. Inc. "Experimental Register" clauses. Rules 7.1 – 8.5.
2. Intended Breed: \_\_\_\_\_
3. Please attach the documentation required under Rule 7.1.

**Please note that, no matings shall take place until approval is granted, and the meeting with the Judge's Guild representatives has taken place.**

Signed: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_