

Feline Control Council of Queensland Inc.

New Prefix Application

No work will be processed unless on the correct form

Name/Joint Names: _____

Address: _____

Phone: _____ Email: _____

Prefix Name: _____

Cat Council: _____

Have you held a Prefix before?

Yes: No: _____

Declaration to be signed by Breeder/Joint Breeders:

I/We hereby make application to have one of the words appearing below registered for use by me/us as a Cattery **PREFIX** to be used preceding the names of cats which will be bred by me/us and/or as an **AFFIX** to be used following the Registered Names of those Cats not bred by me but transferred into my name for use in my breeding program. I/We make this application on the understanding that I/we are required to register all kittens in all litters bred by me/us and also required to remain financially current as an FCCQ registered Breeder each year and of course thereby become bound by the Constitution, By-Laws, Rules and Regulations of the Feline Control Council of Queensland Inc. and of any decisions of the Management Committee.

Signed: _____ Date: _____

Signed: _____ Date: _____

PREFIX Application:

Write below your four preferred names one of which will be used as your cattery prefix.

NOTE: Registered Names of cats (including Prefix) should be unique and it is advisable to select short names to be your cattery Prefix. The use of the approved Prefix is permitted provided that:

1. It be used in naming every cat bred by the owner of the word (except if different breeds are to have different prefixes).
2. It may not be used in naming cats the owner of the Prefix did not breed, except when used as an Affix, see above.
3. No other word which could be construed as a prefix may be used in the naming of cats.

In order or preference:	Prefix	Breeds to use this Prefix:
1		
2		
3		
4		

FEES - REFER TO FCCQ SCALE OF FEES

Joining Fee (includes Prefix Application & Breeder's Registration Card) for new and transferred Prefixes \$ _____

Annual Breeder's Registration Fee to December 31st for all Prefixes \$ _____

TOTAL PAYMENT \$ _____

OFFICE USE ONLY	DIRECT DEPOSIT FELINE CONTROL COUNCIL QLD INC. ACCOUNT PLEASE QUOTE SURNAME/NEW BREEDER		
	BSB: 124 057	ACCOUNT NO: 220 021 54	RECEIPT NO. OF TRANSFER: _____
Transfer Reference: _____	AMOUNT OF TRANSFER: \$ _____	DATE OF TRANSFER: _____	

Cheque/Money Order payable to FCCQ Inc
FCCQ Membership Officer, 8a MacGroaty Street, Coopers Plains QLD 4108

membershipfccqinc@gmail.com