



COLOUR PATTERN RECLASSIFICATION ASSESSMENT FORM

A copy of the cat's registration and pedigree must be presented at the time of assessment together with the

Fee of \$7 plus \$15.00 postage & handling

Name of Cat:			Sex:	
Breed:			D.O.B.	
Reg No:			Colour:	
Sire:			Colour:	
Dam:			Colour:	
Reason For Assessment for Change:				
Request To Change To:				
Judge's remarks (1):				
Judge's Name: [Print]			Signature:	
Judge's remarks (2):				
Judge's Name: [Print]			Signature:	
Judge's remarks (3):				
Judge's Name: [Print]			Signature:	

Please forward completed form with cat's registration certificate to:

Secretary Cats Queensland PO Box 3201 Browns Plains Qld 4118 Ph: 07 4659 5877 Time: 9am – 6pm only email: catsqueensland@gmail.com	DIRECT DEPOSIT DETAILS A/C Name: CATS QLD INC BSB: 638 070 A/C Number: 11748710 REFERENCE Your surname & Re-assessment Office use only:
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