



Performing Animals (Regulation) Act 1925

Application for Registration

Full Name	Surname		First Name	
Stage Name (if any used in Great Britain)				
Nationality				
Address of fixed place of residence in Great Britain or Permanent postal address in Great Britain from which letters directed to applicant will be forwarded				
Address or addresses (if any) in Great Britain, other than temporary addresses while on tour at which applicant trains or intends to train performing animals.	(If none, write "None")			
State whether previously registered under the Act. If so, state the name of local authority by whom registered and number and date of certificate of registration				
Kinds of animals proposed to be - (a) trained (b) exhibited Stating number of each kind	To be trained		To be exhibited	
	Kind	Number	Kind	Number

Describe briefly the general nature* of the performance or performances in which the animals are to be exhibited or for which they are to be trained, mentioning any apparatus which is used for the purpose of the performance.

* The description must be sufficient to give a general idea of what is done by the animals taking part in the performance, and should state the approximate duration of the performance, the number of times for which it is usually to be given in one and the same day, and the number of animals of each kind taking part in the performance. It need not give details which would divulge any professional secret.

I, the undersigned, do hereby apply for registration under the Performing Animals (Regulation) Act 1925, and do hereby declare the following particulars to be true and complete do the best of my knowledge and belief.

Signature

Date 20.....

Address to which certificate of registration is to be sent

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**Performing Animals (Regulation) Act 1925
Application for Variation of Particulars Entered in Register**

Application to have the particulars entered in the register with the respect to the applicant varied.

To the Clerk of the Clackmannanshire Licensing Board

Full name of applicant

Name and date of certificate of registration

I return herewith my certificate under the above Act and I hereby apply to have the particulars entered in the Register with respect to me varied as follows:

I also request that my existing certificate may be cancelled and a new certificate of registration may be issued to me in pursuance of Section 1(6)

Date 20.....

Signature.....

Address to which certificate of registration is to be sent

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Please return the completed form together with the relevant fee to:

**The Licensing Administrator
Clackmannanshire Council
Kilncraigs
Alloa
FK10 1EB**

Note - No fee is payable for the issue of a new certificate of registration

If you require any further information please contact the Licensing Administrator on telephone number 01259 452093 or email address licensing@clacks.gov.uk