

PUREBRED REGISTRATION APPLICATION



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BILLING INFORMATION	
—	
Membership Number	
Membership Name	
City, State, Zip	

Date M M / D D / Y Y Y Y

Membership Number Membership Name (Individual/Farm Registering Calf)

Street City State Zip

Phone Number Fax Number

PLEASE MAKE A COPY OF FORM AFTER COMPLETION FOR YOUR RECORDS.

*** INFORMATION MUST BE COMPLETED FOR REGISTRATION**

CALF INFORMATION:	*NAME OF CALF (NO MORE THAN 35 CHARACTERS INCLUDING SPACES) (EMBRYO TRANSFER CALVES WILL AUTOMATICALLY INCLUDE "ET" IN LAST TWO SPACES)															
DAM INFORMATION:	*DAM REGISTRATION NUMBER				DAM NAME				TEMPER		UDDER SUSP. (1-9)		TEAT SIZE (1-9)			
CALF INFORMATION:	*DATE OF BIRTH M M / D D / Y Y Y Y			*SERVICE TYPE <input type="checkbox"/> Natural <input type="checkbox"/> AI <input type="checkbox"/> ET			SIRE INFORMATION:			*SIRE REGISTRATION NUMBER			SIRE NAME			
CALF INFORMATION:	*LEFT EAR TATTOO		*RIGHT EAR TATTOO		<input type="checkbox"/> *Female		<input type="checkbox"/> *Horned		*COLOR		BIRTH WT.	WEANING WT. & DATE	YEARLING WT. & DATE	CALVING EASE	<input type="checkbox"/> Single	GRP #
					<input type="checkbox"/> *Male		<input type="checkbox"/> *Polled							<input type="checkbox"/> Twin		
	<input type="checkbox"/> *Steer		<input type="checkbox"/> *Scurred													
BREEDING INFORMATION:	PASTURE EXPOSURE START/A.I. DATE M M / D D / Y Y Y Y				PASTURE EXPOSURE END M M / D D / Y Y Y Y				FLUSH DATE M M / D D / Y Y Y Y			EMBRYO TRANSFER DATE M M / D D / Y Y Y Y				
RECIPIENT INFORMATION:	RECIPIENT ID (TATTOO)				RECIPIENT REGISTRATION NUMBER				RECIPIENT DESCRIPTION							
OWNER OF DAM AT BREEDING:	NAME				ADDRESS				SIGNATURE							
OWNER OF DAM AT CALVING:	NAME				ADDRESS				SIGNATURE							
OWNER OF SIRE:	NAME				ADDRESS				SIGNATURE							
TRANSFER INFORMATION:	NAME OF NEW OWNER				MEMBERSHIP # —		ADDRESS									
TRANSFER INFORMATION:	ADDITIONAL NEW OWNER				MEMBERSHIP # —		ADDRESS									
TRANSFER INFORMATION:	DATE OF SALE M M / D D / Y Y Y Y			<input type="checkbox"/> RETURN CERTIFICATE TO SELLER			SIGNATURE OF SELLER									
				<input type="checkbox"/> RETURN CERTIFICATE TO NEW OWNER												