Animals cannot be transferred when using this form.

FILE NO.:

RECEIVED: ----

NOTE: 1. Calves listed on this application must be from one member only.
2. Use included bull permit page for certification of service sire if required.
3. If ET calves result from split or cloned, indicate under embryo removal date.

Application for Entry **AMERICAN ANGUS HERD BOOK** 4. Identify primary ID by type: 840 EID (E), Tattoo (T), Freeze Brand (FB) or Hot Brand (HB) 5.Secondary is only required when 840 EID is used for primary ID. Identify secondary ID by type: Tattoo (T), Freeze Brand (FB), Hot Brand (HB), Visual Tag (V) or Parentage (P).

OFFICE USE ITEM NO.	CALF TAG NO.	S E				NAME OF ANIMAL (LIMIT TO 28 SPACES)	Primary ID Choose One E, T, FB, or HB		T, FB, HB, V or F ID #	Туре	AI Y/N	SIRE REG. NO.	DAM TAG NO.	DAM TATTOO DAM REG. NO.	IF ET CALF LIST EMBRYO REMOVAL DATE BELOW	Check if IVF
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	v cortifs the		above	nodi		s correct; that these Authorized Personal Signature of										
animals are and that the insemination	eligible for ownership	regis provi	tration sions	unde of Ru	er the le 501	rules of the Association; X		Date	Member Code			 4 to 10 months of age 	e\$14	APRIL 6, 2021 10 to 12 months of age Over 12 months of age registration fee plus \$10 p	\$32	
				, .	- 66	licable. City S	State	Dale -					regular	registration lee plus \$10 p		

Bull Permit (To be signed by owner of record of sire if sire was not registered	Bull Permit (To be signed by owner of record of sire if sire was not registered	Bull Permit (To be signed by owner of record of sire if sire was not registered
in name of the owner of record of dam at time of service.)	in name of the owner of record of dam at time of service.)	in name of the owner of record of dam at time of service.)
I certify that my bull, No	I certify that my bull, No	I certify that my bull, No
bred the dam listed on lines(s)	bred the dam listed on lines(s)	bred the dam listed on lines(s)
on the registration application on (date).	on the registration application on (date).	on the registration application on (date).
Insemination was ARTIFICIAL. DATURAL (check one)	Insemination was \Box ARTIFICIAL. \Box NATURAL (check one)	Insemination was CARTIFICIAL. CATURAL (check one)
I further certify that this service conforms with the provisions of Rule 501 governing artificial insemination, if applicable, as follows:	I further certify that this service conforms with the provisions of Rule 501 governing artificial insemination, if applicable, as follows:	I further certify that this service conforms with the provisions of Rule 501 governing artificial insemination, if applicable, as follows:
□ full time employee of owner of bull.	full time employee of owner of bull.	full time employee of owner of bull.
immediate relative of owner of bull.	immediate relative of owner of bull.	immediate relative of owner of bull.
dam was sold by owner of bull with A.I. breeding privilege as a condition of sale.	dam was sold by owner of bull with A.I. breeding privilege as a condition of sale.	dam was sold by owner of bull with A.I. breeding privilege as a condition of sale.
Signed	Signed	Signed
Date Member Code	Date Member Code	Date Member Code
Address	Address	Address
City, State, Zip	City, State, Zip	City, State, Zip
Bull Permit (To be signed by owner of record of sire if sire was not registered in name of the owner of record of dam at time of service.)	Bull Permit (To be signed by owner of record of sire if sire was not registered in name of the owner of record of dam at time of service.)	Bull Permit (To be signed by owner of record of sire if sire was not registered in name of the owner of record of dam at time of service.)
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