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Form B - Single Registration Application (This form may be photocopied) *ET CALVES MUST BE PARENT VERIFIED THROUGH DNA TESTING TO QUALIFY FOR REGISTRATION*

Applicant.	Member Number		Herd Prefix		Manahanahin	Membership Name		
					Membersnip			
Dam Tattoo	(Herd Prefix, Tattoo #,	Yr. Code)	am Registration	#/FC ID		Dam Herd ID/FC Bro	eed	Dam Status
Sire Name			Sire Registrati	on Number			A.I. Date	
If Embryo						_Fresh Embryo	Da	ate of Flush
Transplant:	Recipient Tattoo	·	v Registration #	·		_Frozen Embryo	Da	ate of Transplant
Calf Data:		Recipient Bre	ed Codes					
Г	1 [1 [1					
Herd Prefix	Tattoo #	Yr. Lette	Calf Herd I	D Birth Date	Birth Gro	up Sex Type	H/P/S	Color
Birth Weight	Calving Ease	Calf	Name (25 position	ons, including spa	aces)			
Weaning I	Data: Weaning Date	 Wean.Grou	p Foster/Creep	Wean. Weight	Wean Height	Disposition Dan	n Wt. @ Wean	Dam Condition
Yearling D)ata:							
	Yearling Date	Year. Group	Yearling Weight	Year. Height	Year. Scrotal	Year. Pelvic Hori	zontal Yea	ar. Pelvic Vertical
Transfer T	o: Member Nu			Name				
R	eturn Paper to:			Address				
		Buyer	,	taar ooo				
		Seller	(City		State		Zip Code
D	ate of Delivery or Own	ership for Buye	er:			ND HORMONE FREE		
-				_	ed seller/owner ained since the	time of transfer for complete guarantees that this date of initial owne	animal has be	
						Producer Signature		
	tify and declare that th Insideration of which I							
Applicant S	ignature				Date			