February 2024

LIMOUSIN
North American Limousin Foundation

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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 | Membership Name

_____ _____ _____ _____
Dam Tattoo (Herd Prefix, Tattoo #, Yr. Code) | Dam Registration #/FC ID | Dam Herd ID/FC Breed | Dam Status

_____ _____ _____
Sire Name | Sire Registration Number | A.I. Date

If Embryo Transplant: _____ _____ _____ ____Fresh Embryo _____Date of Flush
Recipient Tattoo | Recipient Cow Registration # | Recip Birth Year
____Frozen Embryo _____Date of Transplant
Recipient Breed Codes ___ ___ ___ ___ - ___ ___ ___ ___

Calf Data:

[___ ___ ___ ___] [___ ___ ___ ___] [___] _____ _____ _____ _____ _____ _____ _____ _____
Herd Prefix | Tattoo # | Yr. Letter . | Calf Herd ID | Birth Date | Birth Group | Sex | Type | H/P/S | Color

_____ _____ _____
Birth Weight | Calving Ease | Calf Name (25 positions, including spaces)

Weaning Data: _____ _____ _____ _____ _____ _____ _____ _____
Weaning Date | Wean.Group | Foster/Creep | Wean. Weight | Wean Height | Disposition | Dam Wt. @ Wean | Dam Condition

Yearling Data: _____ _____ _____ _____ _____ _____ _____
Yearling Date | Year. Group | Yearling Weight | Year. Height | Year. Scrotal | Year. Pelvic Horizontal | Year. Pelvic Vertical

REGISTER NOW? _____ **(Y=Yes N=No)**

Transfer To: _____ _____
Member Number | Name

Return Paper to:

_____ Buyer

_____ Seller

_____
Address

_____
City | State | Zip Code

Date of Delivery or Ownership for Buyer:

_____

ANTIBIOTIC AND HORMONE FREE GUARANTEE
(For designation at time of transfer for complete ownership period)

The undersigned seller/owner guarantees that this animal has been raised from birth or maintained since the date of initial ownership without antibiotics and growth hormones.

_____
Producer Signature

I hereby certify and declare that the above is true and correct and I desire to have the same recorded in the North American Limousin Foundation record, in consideration of which I agree to abide and be bound by the by-laws, rules and regulations of the Foundation amendments thereto.

_____ _____
Applicant Signature | Date