


PIEDMONTESE ASSOCIATION REGISTRATION APPLICATION

	OFFICE USE ONLY
Registration # _____	
Lab Order # _____	

Member Name

Member #

Daytime Phone

Dam Reg #	DNA Lab #
Dam Name	SDV, SV, DV
Sire Reg #	Myostatin # 0, 1, or 2 Myostatin
Sire Name	Weights Date mm/dd/yyyy Pounds Group
Tattoo	Weaning
Herd Prefix, number & Year code	Yearling
Location	Percentage
CALF NAME	Breed 1
Herd Prefix Calf Name (Maximum Number of Characters is 24)	Breed 2
Birth date mm/dd/yyyy	Breed 3
Birth Weight	Breed 4
Breeding Type	Send a copy of your embryo transfer form to the office
Horned Status	
Sex	Category
Color	
Calving ease	
Number Born	

TRANSFER INFORMATION

Name	Member #	Date Sold
Address	Telephone	
City	State	Zip
	E-mail	

I am requesting that the calf listed on this application be transferred to the individual/company listed above. Please mail the completed registration certificate to

I hereby certify and declare that the information provided on this application is the true and correct. It is my desire to have this information recorded in the PAUS herd book. I agree to abide and be bound by the Articles of Incorporation, By-laws, Rules and regulation of the Association and amendments thereof. This performance information may be used for PAUS breed improvement programs. If this animal is co-owned or is being transferred, please complete the transfer information above.

Sign or type your Signature

Date

Payment options:

Check #

Date