

SEND TO:
 Canadian Livestock Records Corporation,
 2417 Holly Lane, Ottawa, Canada K1V 0M7

APPLICATION FOR REGISTRATION

(Please use a separate form for each sire)



**CANADIAN SHORTHORN
 ASSOCIATION**

BREEDER'S NAME _____ ID. NO _____ ADDRESS _____

This form may be used for group registration of calves sired by a single bull. It may only be used to register a calf if you were the owner of the dam or embryo at the time of service and birth of the calf AND if you were the owner of the bull or semen at the time of service. Attach breeding slips or embryo certificates if applicable.

SIRE _____ REGISTRATION NUMBER _____ BREED _____

Name of Animal (not more than 30 letters including spaces)	Polled or Horned (P or H)	Tattoo		Natural Service	A.I.	E.T. Embryo	Date of Birth			Sex	Sex of Twin	Colour of Calf	Name of Dam	Dam's reg. no. or Breed	Service Date			Office Use
		Rt. Ear	Lt. Ear				Day	Mo.	Year						Day	Mo.	Year	
1.																		
2.																		
3.																		
4.																		
5.																		
6.																		
7.																		
8.																		
9.																		

I declare that the above information is in accordance with my private breeding record and is to the best of my knowledge and belief true.

X _____
 Signature of owner at birth or legal authorized representative _____ Date _____

Note: If an animal is a twin, this must be reported at the time of registration.