CANADIAN MEAT GOAT Association

Association CANADIENNE de la CHÈVRE de BOUCHERIE

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# APPLICATION FOR REGISTRATION

**Print or Type all Information, except Signatures**

**Mail to: Canadian Livestock Records Corporation**
2417 Holly Lane, Ottawa, Canada K1V 0M7

**Embryo Transfer** ☐ **Artificial Insemination** ☐

**STATUS** Purebred ☐ Canadian Purebred ☐ 50% ☐ 88% ☐
Traditional Purebred ☐ Recorded Canadian Purebred ☐ 75% ☐ 94% ☐

**ANIMAL NAME:** **(not more than 36 letters including spaces)**

| TATTOO | | MICROCHIP ☐ or EAR TAG ☐ | | SEX: | ✓ | CHECK ONE : | ✓ | Does the animal have a convex profile, Roman nose, and pendulous ears? |
|---|---|---|---|---|---|---|---|---|
| Right Ear | Left Ear | Right Ear | Left Ear | Male | | Polled | | |
| | | | | Female | | Horned, dehorned or disbudded | | YES ☐ NO ☐ |

**Does the animal have Traditional Boer colouring?** YES ☐ NO ☐
(white body; reddish brown on both sides of head which is a minimum of 10cm; ears must be at least 75% reddish brown; reddish brown may extend as far as withers and brisket; body may have a reddish brown mark but it cannot exceed 10% of area)

| BIRTH DATE | | | Number of kids in the birth | | |
|---|---|---|---|---|---|
| Day | Month | Year | Total | Bucks | Does |
| | | | | | |

| | | |
|---|---|---|
| **SIRE** | Reg. No: | Breed: |
| **DAM** | Reg. No: | Breed: |

| BIRTH WEIGHT | EASE OF BIRTH | | CONDITION | REARING | |
|---|---|---|---|---|---|
| lbs. ☐ | U - Unassisted ☐ | H - Hard Pull ☐ | N - Normal ☐ | N - Natural ☐ | R - Milk Replacement ☐ |
| kgs ☐ | E - Easy Pull ☐ | S - Surgical (Caesarean) ☐ | W - Weak ☐ | G - Bottle fed goat`s milk ☐ | S - Fostered ☐ |
| | | M - Malpresentation ☐ | | | |

| | |
|---|---|
| **Name and Address of Breeder (Owner or lessee of dam at time of conception)** | ID No. |
| **Name and address of Owner at Birth (Owner or lessee of dam at time of birth)** | ID No. |
| **Name and Address of Importer** | ID No. |
| **Name and Address of Applicant** | ID No. |
| I HEREBY DECLARE that according to my private record, the above data is accurate to the best of my knowledge ✗ _____ Signature of Owner at Birth or Importer | Application Date |

## CERTIFICATE OF SERVICE OF DAM OR RECIPIENT **(Please report all services. Attach A.I. Breeding Slips when possible)**

| BREEDING or IMPLANT INFORMATION | SERVICE DATE OR PASTURE START DATE | | | PASTURE END DATE | | | SIRE | | |
|---|---|---|---|---|---|---|---|---|---|
| | Day | Month | Year | Day | Month | Year | Name | Reg. Number | Breed |
| Last Service→ | | | | | | | | | |
| Previous Service→ | | | | | | | | | |

I HEREBY DECLARE that according to my private record, the above named dam was served by the above named sire(s) on the dates specified above: ✗ _____ Signature of Owner of Sire

## TRANSFER OF OWNERSHIP

I HEREBY CERTIFY that the herein named animal is legibly tattooed and was sold to _____ (Name)

_____ (Address)

on the _____ (Day) _____ (Month) _____ (Year) and delivered on the _____ (Day) _____ (Month) _____ (Year) ✗ _____ Signature of Owner Selling Animal