



# APPLICATION FOR REGISTRATION CANADIAN DONKEY AND MULE ASSOCIATION

Mail to: Canadian Livestock Records Corporation, 2417 Holly Lane, Ottawa, Canada K1V 0M7.  
**ALL SIGNATURES MUST BE IN INK. ALL INFORMATION MUST BE FILLED IN, IN INK OR TYPEWRITTEN. TO AVOID UNNECESSARY DELAY, PLEASE CHECK THIS APPLICATION FOR ERRORS AND OMISSIONS BEFORE SUBMITTING IT. IF THIS FORM IS REJECTED BECAUSE OF ERRORS OR OMISSIONS, AN ADDITIONAL FEE WILL BE CHARGED FOR REPROCESSING.**

Name (not more than 30 letters including spaces) 1st CHOICE:			
2nd CHOICE:			
<b>Classification:</b> <input type="checkbox"/> Donkey <input type="checkbox"/> Miniature <input type="checkbox"/> Small Standard <input type="checkbox"/> Lg. Standard <input type="checkbox"/> Mammoth		<input type="checkbox"/> Mule <input type="checkbox"/> Hinny <input type="checkbox"/> Zedonk <input type="checkbox"/> Miniature <input type="checkbox"/> Saddle <input type="checkbox"/> Draft	
Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Gelding		Sex of Twin, if any: <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Gelding	
Date of Birth: Day   Month   Year		Date Castrated: Day   Month   Year	
Microchip #:	Microchip Location	Tattoo/Brand	Tattoo/Brand Location
Body Colour		DESCRIPTION of Natural Marks (refer to back of this form)	
<b>SIRE</b> <input type="checkbox"/> Donkey <input type="checkbox"/> Horse Sire's Name: →		Canadian No.	American No.
<b>DAM</b> <input type="checkbox"/> Donkey <input type="checkbox"/> Horse Dam's Name: →			
Name and Address of Breeder (owner or lessee of dam at time of conception of above described animal)			
ID. No. _____			
Name and Address of Owner at Birth (owner or lessee of dam when she gave birth to the above described animal)			
ID. No. _____			
Name and Address of Importer			
ID. No. _____			
Date of Importation Day   Month   Year		Signature of owner at birth or importer	
		X _____	
I declare that the information herein is to the best of my knowledge and belief true.			DATE: _____
<b>CERTIFICATE OF SERVICE</b> (fill in below or attach service report unless service already recorded on dam's certificate)			
I HEREBY DECLARE that the above named dam was served by the above named sire on : Day   Month   Year			<input checked="" type="checkbox"/> CHECK IF A.I.
OR EXPOSED FROM: Day   Month   Year	<b>TO</b>	Day   Month   Year	
Signature of owner of sire at time of service			ID. No. _____
X			

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On the diagram below, outline all white markings of the animal as well as all dark spots within white.  
 If a marking appears on both sides, be sure that it appears on the diagram for each side.  
 Complete the diagrams with the animal in front of you. Do not trust to memory or hearsay.

