AMERICAN MAINE ANJOU ASSOCIATION REGISTRATION APPLICATION MEMBER NUMBER: _____ 204 Marshall Road • P.O. Box 1100 • Platte City, MO 64079 • (816) 431-9950 NAME: _____ • Fax (816) 431-9951 - E-mail: maine@amaapc.com • www.maine-anjou.org ADDRESS: **IF THE DAM OR SIRE ARE NOT REGISTERED YOU MUST PAY TO HAVE THE COMMERCIAL ANIMAL ADDED * YOU MUST BE THE OWNER OF THE DAM AT THE TIME THE CALF WAS BORN * DUES MUST BE PAID TO REGISTER * WORK WILL NOT BE RELEASED WITHOUT PAYMENT** **Please make a copy for your records before mailing. Applications unsigned will not be accepted. ** PHONE: DAM INFORMATION - REGISTRATION # IF ADDRESS CHANGE MARK BOX: DAM'S NAME: RUSHES ARE \$50/8hd & MAILED 1-2 business days 1st class mail. RUSH - MARK BOX DAM'S BIRTH DATE IF COMMERCIAL *Full birthdate CALL AFTER FAXING* FedEx add \$45/buyer DAM'S TATTOO NUMBER IF COMMERCIAL *Required USPS 2-3 day priority w/tracking \$7.50/buyer FLUSH DATE IF THE CALF YOU ARE REGISTERING IS ET Requesting a registration number is a rush **OFFICE USE BELOW:** OWNER/BREEDER NUMBER AT FLUSH RECEIVED DATE: _____ ADD PEDIGREE (\$25 onetime fee applies) Reg# PAYMENT: ______ MAILED: **ASSOCIATION DAM IS REGISTERED WITH:** WEANING/YEARLING INFORMATION **Donors must have DNA, TH and PHA on file with AMAA. *Not required to register SIRE INFORMATION - REGISTRATION # Date Weaned: **SIRE'S NAME:** Weight: SIRE'S BIRTH DATE IF COMMERCIAL *Full birthdate Feed Code (circle one): 1. Creep SIRE'S TATTOO NUMBER IF COMMERCIAL *Required 2. No Creep *Required ADD PEDIGREE (\$40 onetime fee applies) Reg# 3. Twin Raised as Twin 4. Twin Raised as Single **BREED ASSOCIATION** 5. Other Management Group: **Yearling Date:** *AI Sires must have DNA, TH and PHA on file with AMAA. CALF'S REGISTRATION NUMBER (OFFICE USE) Weight: **CALF'S NAME:** Feed Code (circle one): (Name may not exceed 30 characters including spaces) 1. Pasture/Roughage Only RIGHT EAR TATTOO LEFT EAR TATTOO 2. Pasture/Roughage w/supplement *Herd Prefix, number & year letter code <u>must</u> go in at least one ear- 8 characters max/ear 3. Dry Feed Lot BIRTH CODE: 1. SINGLE 2.TWIN TO BULL 3. TWIN TO COW 4. Low Energy Rationed 5. High Energy Ration **BIRTH DATE:** SEX F= FEMALE B= BULL S=STEER 6. Fitted *Bulls born after 1/1/14 must be TH/PHA tested free to register. 7. Bull tested MATING: 1.AI 2. Pasture 3. ET COLOR 8. Other Management Group CALF: H= Horned P= Polled S= Scurred [BIRTH WEIGHT *Signature of Applicant: (MUST BE SIGNED) CALVING EASE: 1. Unassisted 2. Easy Pull 3. Hard Pull 3. Caesarean Χ **BUYER NAME/ADDRESS:** Member #____ NOTES: DATE OF SALE: 1 **SEND CERT TO BUYER** SEND CERT TO SELLER