

Barzona Feed Lot Test

The BBAA is looking for calves to enter our Feed Efficiency and Production Test!

General Test Outline:

- 1) Feed Efficiency Test lasts 60-90 days, preferably on calves that weigh less than 700#.
- 2) Ideal calves are to be 6-9 months old upon delivery and weigh between 300-600 lbs.
- 3) Pens are made up of 25-30 head, usually split between heifers and steers, and by similar sizes.
- 4) Producers who do not wish to retain ownership of calves through the test may choose to have the feedlot purchase those calves.
- 5) Fees are to be paid on a per head basis, amount to be determined after sign up, guaranteed to be \$50 or less.

Current Test Rules:

- 1) Vaccine protocol: calves must be vaccinated with 5-way (BVD) and 7-way (Coccid). Modified live recommended/preferred; at least 2 weeks apart and 2 weeks ahead of delivery date. Veterinarian must sign off that calves have received the vaccinations.
- 2) Wormer protocol: calves must be wormed a minimum of 2 weeks prior to delivery, Ivermec Plus recommended by feedlot.
- 3) Calves must be weaned for at least 45 days prior to delivery.
- 4) Calving window of 90 days (dates to be determined).

Consignor/Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Steers Entered: _____

List Tattoo/Tag Numbers: _____

I, _____, agree to the terms and conditions set forth in the rules and regulations by the Barzona Breeders Association of America for the Feedlot Test, and hereby authorize the Barzona Breeders Association of America to deduct the fees for this feedlot test from the sale(s) of the above mentioned animals. I am aware that the fee may vary, but may not be above \$50/head.

Signature: _____ Date: _____

BBA Efficiency and Production Test
Vaccination Form

Producer: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____

List all animals seen by veterinary:

Vaccines must be given at least 2 weeks apart, and 2 weeks before delivery:

Please List if vaccines were Modified Live or Dead
Wormer can be done during either visit, Ivermec Plus recommended

Vaccinated with (List Brand):	Date 1st Shot:	Date 2nd:
BVD: _____	_____	_____
Coccidiosis: _____	_____	_____
Wormer Treatment: _____	_____	

I hereby certify that the above procedures have been followed and administered to the animals listed. Listed animals are, to the best of my knowledge and judgment, free from infectious and contagious diseases (including warts, ringworm and mange).

Veterinarian (print): _____
Address: _____
Phone: _____

Signature: _____

Date: _____