



Dutch Belted Cattle Association of America

Application for Registration

Name of Animal: _____

Sex: M F

Date of Birth: _____

Color: _____

This animal is a product of:

(Check one)

Natural Service

Embryo Transfer

(Attach ET certificate)

Artificial Insemination

Tattoo Right: _____

Tattoo Left: _____

Ear Tag #: _____

Brand/Microchip: _____

Sire Name/Reg. #: _____

Dam Name/Reg. #: _____

----- If bull is not owned by the owner of the cow, please complete the following: -----

I certify that my bull

Reg. #

bred the dam named in this application

on (date) _____

. Insemination was:

Natural

Artificial

Signed: _____

Address: _____

State: _____

Zip: _____

Breeding Certification: (Attach breeding receipt if that system is used.) Breeder agrees to maintain accurate breeding records, to open all records for inspection on demand, and to submit to blood typing as deemed necessary by DBCAA. I hereby certify that the above pedigree is correct and that this animal is eligible for registration under the rule of DBCAA.

Breeder: _____

Address: _____

State: _____

Zip: _____

Phone: _____

Email: _____

First Owner: _____

Address: _____

State: _____

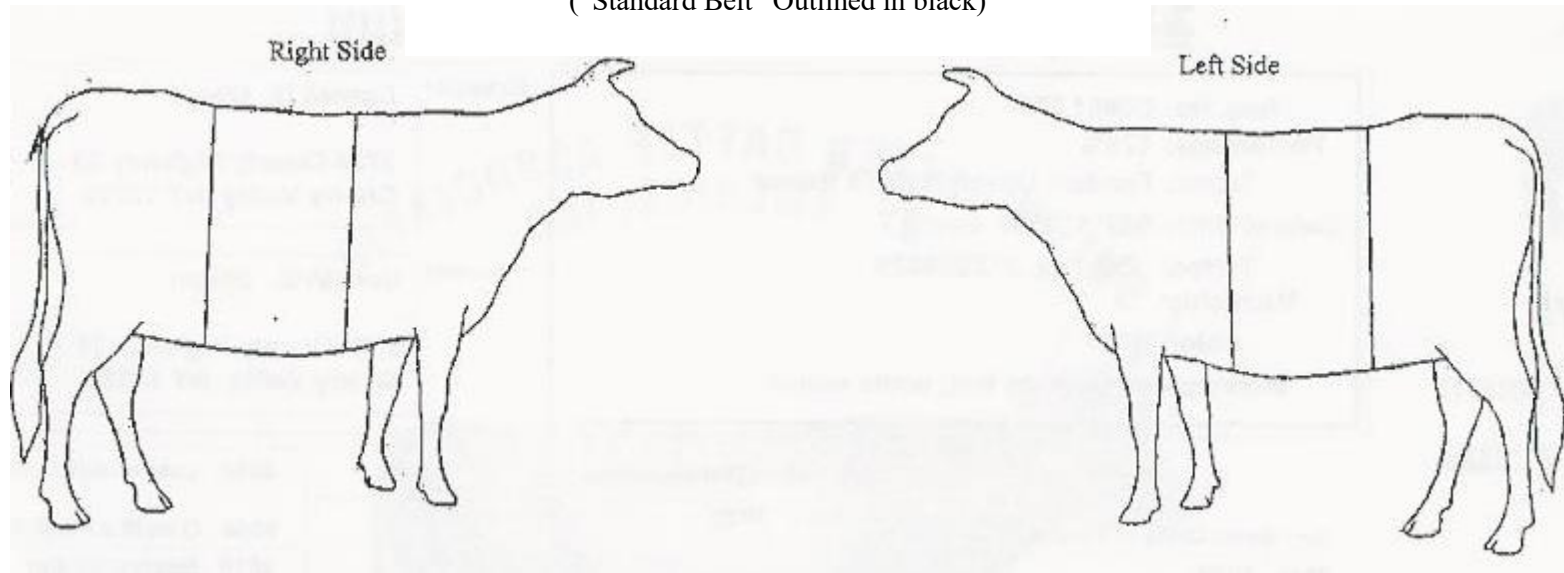
Zip: _____

Phone: _____

Email: _____

Sketch exact delineation of belt on the reverse of this sheet (even if it is standard) and mark all other white markings using red ink. Transfers must be signed by all owners or legal agents.

Diagram of Animal Showing Belt & Other Markings
(“Standard Belt” Outlined in black)



Transfer Form

Upon sale of animal, it is the responsibility of the seller to sign, date and return this certificate to the Dutch Belted Cattle Association of America with the transfer fee of \$4.00 for member/\$8.00 for non-member. A new certificate will be sent to the current owner.

(Print name and address clearly.)

For the value received, I (we) hereby sell, assign and transfer:

Name of Animal: _____ Reg. #: _____

To new owner: _____ Address: _____ State: _____ Zip: _____

Phone: _____ Email: _____ and consent to the transfer on the books of the DBCAA.

Signature: _____

Date: _____

Please make checks payable to DBCAA.

**Send to: DBCAA
c/o Kristine Haag
15470 N 3400 East Rd
Cullom, IL 60929
(815) 689-2231
rhaag@frontiernet.net**