

Phone Number(s): E-mail Address: Website:

Registration Application

HCA Irish Jersey & Belfair Cattle Registry

homesteadcattle.com • 406-591-6568 PO Box 50058 • Billings, Montana 59105

homestead.cattle.assn@gmail.com

	for office use only
Date:	
Memb №:	
Reg Nº:	
Division:	

Zip | Postal Code:

PHOTOS: Submit 2 or more clear photos by email; of left & right side view of the animal; which must be clean, dry, standing up & showing all markings including legs, feet & tail. One photo must also show the face. Photo(s) will be printed on Registration Certificate. % Dexter and % Jersey and % other: Animal registered? animal name, other registry, registration number: (choose name up to 30 alphanumeric characters & spaces to include breeder prefix and suffix (TW, ET, CL required; Al optional) – punctuation characters allowed: (-) (&) Year Letter: BWT: Calving Ease CE code: Sex: Female cow | heifer Male bull | steer Born: single TW twin or multiple to hfr(s) bull(s) born result of natural service A.I. ET Embryo Transplant CL Clone Color: black red gray fawn mulberry dilute double dilute Horns: horned de-horned polled scurred (you may need to include DNA test results for uncertain colors such as wild red, silver, etc.) (describe: baldie, belt, blaze, brindle, britches, brockle-face, fringed ear, chest, crest, cs/color sided, fawn, goggles, lightning, roan, socks, spot, speckled, star, switch, underline, etc) Eye Pigment: left right both n/a Height: inches over hip ~ measured @ age: hours days months years (eye pigment applicable to whiteface cattle only) Tattoo; Left Ear: _____ Right ear: ____ State Metal Tag №: ____ Brisket Tag: ____ Neck Tag: ____ LE RE Color: Herd ID Tag №: LE RE Color: RFID / EID №: State: Location of Brand: Other ID: DNA test results: _______(include documentation) Breed Association Registration № Herd or Semen Code № MINIATURE HOMESTEAD FB fullblood (100%) PB purebred (high%; upgrade) composite crossbred Breed Association Registration № Herd or Semen Code № Dam Breed(s): MINIATURE HOMESTEAD **FB** fullblood (100%) **PB** purebred (high%; upgrade) composite crossbred • If animal is result of Natural Service provide the dates which sire listed had access to dam ~ from date: • If animal is result of Artificial Insemination or Embryo Transfer attach all breeding records, receipts or reports with date(s) of service. • If box for Embryo Transplant or Clone is checked include Embryo Transplant Form with this application. For Cloning call office for more information. Breeder Prefix, Outfit, Name: Member №: _____ (owner of record of its dam at time of conception) Breeder Address, Email, Phone: Owner/ Agent Name & Outfit: Member №: (owner of calf) As recorded owner or authorized agent of the Dam of this animal at time of birth, (I / we) hereby certify that all information on this registration application is true and correct and complete to the best of (my/ our) knowledge. (I /we) understand that any information knowingly omitted or falsified on this application may lead to cancellation of an animal's registration and / or forfeiture of this Homestead Cattle Registry standing membership privileges. By submitting this document, (I / we) hereby agree to be bound by HCA By-Laws and all terms and conditions of Rules and Regulations of this HCA Associated Cattle Registry. Owner/ Agent Signature: Member №: Printed Name: Address: State | Province: ___