



HOMESTEAD CATTLE ASSOCIATION (HCA)

date received: _____ member №: _____

REGISTRATION APPLICATION

Registration №: _____ Date issued: _____ BREED: _____

FOR OFFICE USE ONLY

Animal already registered? name: _____ other registry: _____

Name: _____
choose name up to 30 alphanumeric characters & spaces to include prefix and suffix (ET, TW or CL) – hyphens are allowed; no other characters or punctuation

Date of Birth: _____ 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.)

Markings: _____
(describe: ankles, baldie, belt, blaze, brindle, britches, brockle-face, chest, crest, cs/color sided, fawn, goggles, lightning, roan, socks, spotted, speckled, star, tail switch, underline)

Eye Pigment: left right both n/a Height: _____ inches over hip – measured @ age: _____ days months years
eye pigment only applicable to whiteface cattle

Tattoo; Left Ear: _____ Right ear: _____ Herd ID Tag №; Left Ear: _____ Right Ear: _____ Tag Color: _____

RFID / EID №: _____ State Metal Tag №: _____ Brisket Tag: _____ Neck Tag: _____

Brand: _____ State: _____ Location of Brand: _____ Other ID: _____

Breed(s): _____
 FB fullblood (100%) PB purebred (high%; upgrade) composite crossbred

Sire: _____
Name Registration № Herd or Semen Code № Breed Association

Sire Breed(s): _____
 FB fullblood (100%) PB purebred (high%; upgrade) composite crossbred

Dam: _____
Name Registration № Herd № Breed Association

Dam Breed(s): _____
 FB fullblood (100%) PB purebred (high%; upgrade) composite crossbred

DNA test results: _____

Owner of Dam at time of Breeding ~ Name: _____ Member №: _____
(owner/ lessee of dam at time of conception)

Address: _____

Owner of Dam at time of Calving ~ Name: _____ Member №: _____

Address: _____

Dams Breeding Record

- If animal is result of Natural Service provide the dates which sire listed had access to dam ~ from date: _____ to _____
- 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 for more information.

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 knowledge, and that the Homestead Cattle Associated Registry shall have the privilege to correct and/ or cancel this application under the Rules and Regulations of the Registry. By submitting this document, (I / we) hereby agree to be bound by HCA ByLaws and the terms and conditions of the HCA Associated Registry. (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 Homestead Cattle Association standing member privileges.

Owner / Agent Signature: _____ Member №: _____

Printed Name: _____ Address: _____

City: _____ State or Province: _____ Zip or Postal Code: _____

Phone Number(s): _____

E-mail Address: _____

HCA will not share your information