



Canadian Livestock Records Corporation
2417 Holly Lane, Ottawa, Canada K1V 0M7
Canadian Tarentaise Association

APPLICATION FOR REGISTRATION
Print or Type all Information, except Signatures



If transplant, indicate embryo certificate number or recipient identification.

Name: (not more than 30 letters including spaces)											LEAVE BLANK	
CHECK ONE ✓:		SEX: ✓		SEX OF TWIN: ✓		%	BIRTH DATE			TATTOO		
Polled		Male		Male			Day	Month	Year	Right Ear	Left Ear	
Horned												
Scurred		Female		Female								
NATIONAL EAR TAG				Colour:				Other; Specify:		Check if calf was a result of:		
Right Ear		Left Ear		Black <input type="checkbox"/>		Red <input type="checkbox"/>				A.I. <input type="checkbox"/>	E.T. <input type="checkbox"/>	
Sire:								Reg. No:				
Dam:						Reg. No:		Breed:				
Bred By (Fill in name and address of owner or lessee of the dam at the time she was served to produce this calf)										ID No.		
Owned at Birth by (Fill in name and address of owner or lessee of the dam at time she gave birth to this calf)										ID No.		
I declare that the information herein is to the best of my knowledge and belief true. <input checked="" type="checkbox"/>										Date:		
PERFORMANCE RECORDS		WEANING WEIGHT		DATE WEIGHED		DATE OF BIRTH		Calving Ease				
		Lbs.				OF DAM ↓						
BIRTH WEIGHT		365 DAY WEIGHT		DATE WEIGHED				U - Unassisted <input type="checkbox"/> S - Surgical (Caesarean) <input type="checkbox"/>				
Lbs.		Lbs.						E - Easy Pull <input type="checkbox"/> M - Malpresentation <input type="checkbox"/>				
								H - Hard Pull <input type="checkbox"/>				

CERTIFICATE OF SERVICE OF DAM OR RECIPIENT
(Please report all services. Attach A.I. Breeding Slips when possible)

BREEDING or IMPLANT INFORMATION	SERVICE DATE OR PASTURE START DATE			PASTURE END DATE			SIRE		
	Day	Month	Year	Day	Month	Year	Name	Reg. Number	Breed
Last Service →									
Previous Service →									
I HEREBY DECLARE that according to my private record, the above named dam was served by the above named sire(s) on the dates specified above:									
<input checked="" type="checkbox"/> _____ Signature of owner of sire or authorized representative sign here.									

CERTIFICATE OF OWNER AT BIRTH

I HEREBY DECLARE that the foregoing information is to the best of my knowledge and belief, true and that the above named animal is actually identified as indicated.

DATE _____

Owner of Animal at time of birth or importer or authorized representative sign here.
Partnership or company signatures must be countersigned by the person authorized to sign.
If you owned the sire and dam at time of service, and the animal was born your property, sign once only on line indicated by X.

If calf, sold, attach completed and signed Application for Transfer.