



Phone: 306-757-2212 Email: registry@canadianshorthorn.com
Mail: Box 3771, Regina, SK S4P 3N8

APPLICATION FOR TRANSFER OF OWNERSHIP

I CERTIFY THAT I (THE SELLER),

Name: _____ CSA Member #: _____

HAVE SOLD THE FOLLOWING SHORTHORN ANIMAL:

Animal's Registered Name	Registration Number	Tattoo
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SOLD TO:

Buyer 1 Name: _____ CSA Member #: _____
(if known)

Buyer 2 Name: _____ CSA Member #: _____
(if known)

Buyer 3 Name: _____ CSA Member #: _____
(if known)

Address: _____
Address to send Certificate to (Including: Street, Town/City, Prov., Postal Code)

Email: _____ Phone: _____

DATE OF SALE: _____ *(dd/mm/yyyy)*

RECORD OF BREEDING INFORMATION ASSOCIATED WITH THE SOLD FEMALE

THE SOLD FEMALE WAS **OPEN** AT THE TIME OF SALE

SIRE'S REGISTERED NAME

SIRE'S CSA REG. #

BREEDING DATE(S)

Signature of Seller

Signature of Seller or Authorized Representative

Date

dd/mm/yyyy