

APPLICATION FOR REGISTRATION OF AN IMPORTED ANIMAL

FOR OFFICE

BREED _____ DATE IMPORTED _____

NAME _____ SEX _____

DATE OF BIRTH _____ COLOUR _____ POLLED/HORNED _____

TATTOO/EAR TAG _____ RIGHT EAR _____ LEFT EAR _____

RIGHT
EAR



LEFT
EAR

SIRE _____ REG. NO. _____

DAM _____ REG. NO. _____

Bred by _____

I declare that the above information is to the best of my knowledge true and the animal is tattooed or ear tagged as indicated.

DATE _____ SIGNATURE OF IMPORTER _____

G-56cattleimportapp.cdr/server

CANADIAN SHORTHORN ASSOCIATION
REGISTRY/MEMBER SERVICES
Unit A, #13 4101 - 19 Street NE
Calgary, Alberta T2E 7C4