Birth Report – Application for Entry

Form B

Applicant: _____ _____ _____

Member Number **Herd Prefix** Membership Name

_____ _____ _____ _____

Dam Herd ID/FC Breed **Dam Tattoo (Herd Prefix, Tattoo #, Yr. Code)** **Dam Registration #**/FC ID Dam Status

_____ _____ _____

Sire Name **Sire Registration Number** **A.I. Date**

Calf Data:

[__ __ __ __] [__ __ __ __] [__] _____ _____ _____ _____ _____ _____ _____

Herd Prefix **Tattoo #** **Yr. Letter** . Calf Herd ID **Birth Date** Birth Group **Sex** Type H/P/S Color

_____ ____ __

Birth Weight Calving Ease Calf Name (26 positions, including spaces)

Weaning Data: _____ _____ _____ _____ _____ _____ _____ _____

Weaning Date Wean.Group Foster/Creep Wean. Weight Wean Height Disposition Dam Wt. @ Wean Dam Condition

Yearling Data: _____ _____ _____ _____ _____ _____ _____

Yearling Date Year. Group Yearling Weight Year. Height Year. Scrotal Year. Pelvic Horizontal Year. Pelvic Vertical

REGISTER NOW? _____ **(Y=Yes N=No)**

Transfer To: _____ _____

Member Number Name

_____

Address

_____

Date of Delivery

ANTIBIOTIC AND HORMONE FREE GUARANTEE
(For designation at time of transfer for complete ownership period)
The undersigned seller/owner guarantees that this animal has been raised from birth or maintained since the date of initial ownership without antibiotics and growth hormones.

Producer Signature _____

I hereby certify and declare that the above is true and correct and I desire to have the same recorded in the North American Limousin Foundation record, in consideration of which I agree to abide and be bound by the by-laws, rules and regulations of the Foundation amendments thereto.

_____ _____

Applicant Signature **Date**