



# Registration Application

## American Pinzgauer Association

P.O. Box 118, Butler, MO 64730  
(816) 738-4179

FOR OFFICE USE ONLY

Registration No: \_\_\_\_\_

Date: \_\_\_\_\_

Name: \_\_\_\_\_

Name Choice - Please limit your choice to 30 characters or less including prefix and suffix (ET, TW or CL)

Breed Section:  - Austrian Fullblood  - American Fullblood  - Purebred  - Percentage Pinzgauer

Date of Birth: \_\_\_\_\_ Sex of Animal: \_\_\_\_\_ Color: \_\_\_\_\_ Horn Status: \_\_\_\_\_  
( Month / Day / Year ) (Cow | Bull | Steer) ( Red & White | Black & White | Tan & Other ) (Horned | Polled | Scurred | De-Horned)

Birth Weight: \_\_\_\_\_ Birth Was:  -Single  -Twin to Cow  -Twin to Bull  -Embryo / IVF Transplant

Calving Ease:  - No Assistance  - Some Assistance  - Difficult  - Surgery or Abnormal  - Dead on Delivery

Tattoo: Left Ear: \_\_\_\_\_ Right ear: \_\_\_\_\_ Herd ID Tag No.: Left Ear: \_\_\_\_\_ Right Ear: \_\_\_\_\_ Tag Color: \_\_\_\_\_

RFID / EID No.: \_\_\_\_\_ State Metal Tag No.: \_\_\_\_\_

Brand: \_\_\_\_\_ Location of Brand: \_\_\_\_\_ Other ID: \_\_\_\_\_

If animal is weaned must provide a weaning weight: \_\_\_\_\_ Date Weight Taken: \_\_\_\_\_ ( Month / Day / Year )

If animal is a yearling must provide a yearling weight: \_\_\_\_\_ Date Weight Taken: \_\_\_\_\_ ( Month / Day / Year )

Parentage: If sire or dam is not registered, other ID must be used for identification - (RFID / EID or State Metal Tag No. is recommended).

Sire: \_\_\_\_\_  
Name Registration No. Herd or Semen Code No. Breed Association

Dam: \_\_\_\_\_  
Name Registration No. Herd No. Breed Association

Animal being registered is the result of: \_\_\_\_\_ NS (Natural Service) \_\_\_\_\_ AI (Artificial Insemination) \_\_\_\_\_ ET / IVF

(If animal being registered is marked above as an ET/IVF or a Clone - please attach any pertinent documents with application if available)

Dams Breeding Record: \_\_\_\_\_ If animal is result of ET / IVF enter recipient ID number: \_\_\_\_\_

If animal is result of AI or from an ET / IVF embryo - attach all breeding receipts or report date of service: \_\_\_\_\_

If animal is result of Natural Service please provide the dates which sire listed had access to dam:

From date: \_\_\_\_\_ to \_\_\_\_\_

### Owner of Dam at time of Breeding:

Owner Name: \_\_\_\_\_ Member No.: \_\_\_\_\_

Address: \_\_\_\_\_ City,State,Zip \_\_\_\_\_

### Owner of Dam at time of Calving:

Owner Name: \_\_\_\_\_ Member No.: \_\_\_\_\_

Address: \_\_\_\_\_ City,State,Zip \_\_\_\_\_

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 to the best of my knowledge, and that the American Pinzgauer Association 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 the terms and conditions of the American Pinzgauer Association.

Owner/Agent Signature: \_\_\_\_\_ Member No.: \_\_\_\_\_

Address: \_\_\_\_\_ Printed Name: \_\_\_\_\_

City: \_\_\_\_\_ State or Province: \_\_\_\_\_ Zip or Postal Code: \_\_\_\_\_

Phone Numbers: Home\_(\_\_\_\_\_) \_\_\_\_\_ Cell\_(\_\_\_\_\_) \_\_\_\_\_ Fax\_(\_\_\_\_\_) \_\_\_\_\_

E-mail Address: \_\_\_\_\_

(Your e-mail address WILL NOT BE SHARED)