

AMERICAN ROMELDALE-CVM ASSOCIATION, INC.

REGISTRATION APPLICATION

Phone: 785-456-8500 • PO Box 27 • Sedalia, MO 65302 • Email: asregistry@gmail.com



Important

1. Type or Print Legibly
2. Check your application for errors
3. Proper fees must accompany all work

BREEDER
(Owner of Dam at Time of Mating) _____

ADDRESS
St. OR Rt. _____ CITY _____ ST _____ ZIP _____

OWNER
(Owner of Dam at Time of Birth) _____

ADDRESS
St. OR Rt. _____ CITY _____ ST _____ ZIP _____

Member # _____

Jr. Member # _____

Leave Blank For Office Use Only	1* Base Color	2* Pattern	3 Sex	4 Name of Animal Private Flock Tag or Tattoo Number	5 Birth Type Sg, Tw, Tr	6 Horns-H Scurs-s Pulled-p	7 Birthdate	8 - Sire		9 - Dam		10 - Transfer	
								Registration Number	Name Private Flock Tag	Registration Number	Name Private Flock Tag	Date of Sale	If sold, To Whom & Address (enclose transfer fee)
Sample	B	M	E	Huber 09-26	TW	H	2-27-18	508070	Wilson 50	96199A	Huber 85-23		

ATTENTION

- Please sign as Dam or Sire Owner or Both
- Please Check Work for Accuracy.
- After Completion, Please Keep a Copy of this Form in Your File

DATE _____

DAYTIME PHONE _____

EVENING PHONE _____

FAX NUMBER _____

E-MAIL _____

SIGNATURE OF OWNER OF DAM (time of lambing) _____

SIGNATURE OF OWNER OF RAM (time of mating) _____

Applications completed by partnership must also bear signature of a person authorized to sign for account.

*Signature above represents:
"The information here is correct to the best of my knowledge and belief"*

**Please consult the second page for the appropriate "Body Color" and "Pattern" abbreviations