

APPLICATION FOR GENETIC RECOVERY PROGRAM

AMERICAN JERSEY CATTLE ASSOCIATION • USE INK TO COMPLETE FORM

		USDA EARTAG NO. or INDEX NO.	AMERICAN I.D. NUMBER, IF ASSIGNED						
FEMALES ONLY. THIS ANIMAL QUALIFIES AS: <input type="checkbox"/> ORIGINAL ANIMAL (OA) <input type="checkbox"/> PROVISIONAL REGISTER (PR) <input type="checkbox"/> HERD REGISTER (GR)	FIRST CHOICE NAME: LIMIT TO 27 LETTERS AND SPACES AND PRINT IN ALL CAPITAL LETTERS. DO NOT INCLUDE PREFIX OA, PR or GR.								
	SECOND CHOICE NAME								
	MO. DATE OF BIRTH YR. DAY	RIGHT EAR TATTOO OR EARTAG MGT. NO.	LEFT EAR TATTOO OR EARTAG MGT. NO.	<input type="checkbox"/> TWIN WITH BULL <input type="checkbox"/> NATURALLY POLLED <input type="checkbox"/> TWIN WITH HEIFER <input type="checkbox"/> EMBRYO TRANSFER					
SIRE NAME		SIRE REGISTRATION NUMBER							
DAM NAME		DAM REGISTRATION NUMBER OR INDEX NO.							
SERVICE DATA. I hereby certify this animal is the result of <input type="checkbox"/> NATURAL SERVICE or <input type="checkbox"/> A.I. SERVICE on <table style="display: inline-table; border: 1px solid black; margin-left: 10px;"> <tr> <td style="width: 20px; text-align: center;">MO.</td> <td style="width: 20px; text-align: center;">DAY</td> <td style="width: 20px; text-align: center;">YR.</td> </tr> <tr> <td style="border: none;"> </td> <td style="border: none;"> </td> <td style="border: none;"> </td> </tr> </table> or breeding receipt is attached.		MO.	DAY	YR.				AGREEMENT AND CERTIFICATION. I have received copies of the <i>Constitution and Bylaws of the American Jersey Cattle Association</i> and of the Association's <i>Rules for Registration and Transfer of Jersey Cattle</i> , and in consideration of the registration of this animal, I agree to all the terms and provisions thereof. I understand that under certain circumstances described in the Constitution, the Board of Directors of the Association may take disciplinary action against me. I agree that in such event the Board's action and the reasons therefore may be published in the <i>Jersey Journal</i> , and I waive any claim for damages or otherwise resulting from such publication. I HEREBY CERTIFY to the truth and accuracy of the data given in this application and offer this animal for entry on the records of the Association. The animal offered for registration has been plainly tattooed in the ear with indelible ink or identified by approved eartags in both ears. I accept full responsibility for any damages resulting from inaccurate breeding information unless the breeding receipt is attached. In addition, I agree that all records of the animals in my herd, whether maintained by me or others, including production records, may be obtained and used by the Association in its programs.	
MO.	DAY	YR.							
IF ANIMAL IS DEAD, ENTER DATE OF DEATH	MO. DAY YR.	SIGNATURE OF OWNER OF DAM AT TIME OF CALVING	AJCA CUSTOMER NUMBER						
PROPER FEES MUST ACCOMPANY ALL APPLICATIONS. HAVE YOU DOUBLE-CHECKED ALL NUMBERS?		BY AUTHORIZED AGENT							
PREVIOUSLY UNREPORTED ADDRESS CHANGE(S): STREET		CITY	STATE ZIP CODE+4						
AREA CODE / TELEPHONE NUMBER	EMAIL ADDRESS	OFFICE USE ONLY							

Mail application with correct fee to **American Jersey Cattle Association, 6486 E. Main St., Reynoldsburg, OH 43068-2362**

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