

IRISH CHAROLAIS CATTLE SOCIETY LTD.

UNIT 2, ST. JOHNS COURT, ST. JOHNS GROVE, JOHNSTOWN, CO. KILDARE, W91 V38Y. Tel 01-4198050

BREEDER APPLICATION FORM

PLEASE USE BLOCK CAPITALS

Name: _____

Address: _____

_____ Tel No. _____

Email: _____ BTE Herd No: _____

Data relating to the genealogy and performance of breeder's cattle may be communicated to and examined and processed by competent authorities in the field of livestock breeding, subjects to Council approval and the Society will disseminate the results of this analysis as the Council see fit from time to time.

Breeders herd details and personal data (name/address and telephone no.) will be included in the herd book data on the Charolais website.

Payment - An invoice will be emailed from the Society, showing the full amount to be paid for the registration, which will have a quotation number. This quotation number must be supplied by the owner when paying via EFT.

I/We have read and agree to abide by the Society's Breeding Programme and Rules Procedure.

I/We agree to make the payments required by the Rules of the Society and otherwise to be bound thereby.

_____ Date: _____
Signature of Owner

FOR OFFICE USE ONLY

CMMS Form _____

Date Accepted _____

Animal Registration Notification Form

(All sections must be fully completed)

Animals Details

Animals National ID No. _____

Date of Birth: _____ Animals Sex: _____

(If Twin) Twin to Male or Female _____

Parentage Details

Sire's Name: _____

Sire's Full Tag Number or AI Code: _____

Dam's Name: _____

Dam's Full Tag Number: _____

ET Calf Details

If ET Calf: Recipients Tag Number _____

Breed of Recipient: _____ Date of Flushing _____

I hereby declare that all the details given by me in all sections of this application form to be true and accurate.

Breeders Signature: _____ Date: _____
