



**Registration Application**

Effective 01/2011

This form after filled out, may be scanned and emailed to the Registry.  
Please e-mail it to info@compositebeef.com

*FOR OFFICE USE ONLY*

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

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

**Name Choices - Please limit your choices to 30 character or less including prefix and suffix (ET, CL or Twin)**

1st Choice:

2nd Choice:

3rd Choice:

Check the Box below if this animal was the result from  
Embryo Transplant      Clone



If either above box is checked, include Embryo  
Transplant Transfer Form with this application.

**Animal Information**

Date of Birth:         Birth Weight Lbs:       Sex of Animal:       **Cow  
Bull  
Steer**

Birth Was:  Single     Twin to Cow     Twin to Bull      Calving Ease:

**Identification**

Tattoo:      Left Ear       Right Ear       Year Letter Code:

Herd ID No:      Left Ear       Right Ear       Tag Color:

RFID/EID No:       Bangs Tag No:

Freeze Brand:       Other:

**Characteristics**

Color:       Horn Status:       **Horned  
Polled  
Scured  
De-Horned**

**Breed Makeup**

Breed #1:	Breed Code <input type="text"/>	Breed Percent <input type="text"/>	Breed #5:	Breed Code <input type="text"/>	Breed Percent <input type="text"/>
Breed #2:	Breed Code <input type="text"/>	Breed Percent <input type="text"/>	Breed #6:	Breed Code <input type="text"/>	Breed Percent <input type="text"/>
Breed #3:	Breed Code <input type="text"/>	Breed Percent <input type="text"/>	Breed #7:	Breed Code <input type="text"/>	Breed Percent <input type="text"/>
Breed #4:	Breed Code <input type="text"/>	Breed Percent <input type="text"/>	Breed #8:	Breed Code <input type="text"/>	Breed Percent <input type="text"/>

**Parentage**

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

Dam:                     
   Animal Name      Registration No.      Herd Number      Breed Association

**Authorized Signature**

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 Composite Beef Cattle Registry 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 Composite Beef Cattle Registry.

Owner/Agent Signaturer: \_\_\_\_\_ Member No: \_\_\_\_\_

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

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

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

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

*(The Composite Beef Cattle Registry WILL NOT SHARE your e-mail address)*