

American Pinzgauer Association

American Pinzgauer Association PO Box 1477 Kingsville, TX. 78364

Phone: 361-296-5093 info@pinzgauers.org

Registration Application – **Everything MUST be filled in to receive a certificate**

Member Number:	ımber: Member Name:					
Address:	Town	· 		State:	_Zip:	
Breeder Number:	Breeder Name:_					
Dam Registration Number:	umber:					Please Note: If the animal you are registering has Canadian pedigreed animals please
Animal ID: Breeding Type: Al: Natural:						include a copy of those registration papers
Birth Date:/Birth Weighth Group: Please circle the following: Breed Code: Austrian Fullblood Color: 1.) Red & White 2.) Black & White Birth Type: 1.) Single 2.) Twin	or America 3.) Tan & other	_ Tattoo Left Ear: _ n Fullblood 4.) Embryo Trans	or	RightEar:_ PureBred	Or	
Calving Ease: N.) No Assistance S.) Som Horned: Polled Horned Sex: Bull Heifer If Weaned must provide a weaning weigh If animal is a yearling must provide a yea	e Assistance Scurred Steer t:		Y.) Surgery	A) Abnormal	correctin the Alament may be prograted bound and Re	by Certify and declare that this is a true and t statement, and I desire to have same recorded APA herd book of the association and diments thereto. This performance information is used for the APA breed improvement ims. In consideration I agree to a bide and be by the Articles of Incorporation, Bylaws, Rules ingulations.
Transfer on Entry – Name: Address: Breeder #: Date of sale:// Return Certificate to: seller buyer New Breeder: Yes No Phone number:						