APPLICATION FOR REGISTRATION

American Wagyu Association

P.O. Box 547, Pullman, WA 99163 Phone (509) 397-1011

I certify that the information given on this application is true and correct and the animals, which are named, for which application for recording is made, have no physical characteristics that would disqualify them

AWA Membership

I.D. Number _____
Herd Prefix Tattoo

_____
Location of Private Herd No.

_____

OWNERS NAME	ADDRESS	OWNERS SIGNATURE	PHONE NUMBER	DATE
		X	( )	

ANIMAL TO BE REGISTERED									SIRE				DAM		
PRIVATE HERD NO.	NAME (28 Characters Maximum including spaces)	DNA Number	SEX	BIRTH DATE MO	BIRTH DATE DA	BIRTH DATE YR	Color	HPS	PRIVATE HERD NO.	%	AWA REG. NO	Type Service	PRIVATE HERD NO	%	AWA REG. NO.