



BULL APPLICATION FOR ENTRY

Cattle will be dropped off: Friday (November 1st) Saturday (November 2nd)

Breeder's Name: _____

Address: *(Inc. Postal Code)* _____

Telephone Number: _____

Fax Number: _____

Email: _____

Tattoo _____

CCIA Identification # _____

Breed _____

Birth Date _____

Birth Weight _____

Calving Ease
U- Unassisted
E- Easy Pull
H- Hard Pull

Born as
S- Single
T- Twin

Raised as
S- Single
T- Twin

Weaning Weight _____

Weaning Date _____

Sire's Name _____

Sire's Tattoo _____

Dam's Tattoo _____

Horn
P-Polled
S-Scurred
H-Horned

Tattoo _____

CCIA Identification # _____

Breed _____

Birth Date _____

Birth Weight _____

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Sire's Tattoo _____

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Tattoo	_____
CCIA Identification #	_____
Breed	_____
Birth Date	_____
Birth Weight	_____
Calving Ease	U- Unassisted E- Easy Pull H- Hard Pull S- Single T- Twin
Born as	S- Single T- Twin
Raised as	T- Twin
Weaning Weight	_____
Weaning Date	_____
Sire's Name	_____
Sire's Tattoo	_____
Dam's Tattoo	_____
Horn	P-Polled S-Scurred H-Horned

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Sire's Name	_____
Sire's Tattoo	_____
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Horn	P-Polled S-Scurred H-Horned