

American Miniature Jersey
Association & Registry, LLC
P.O. Box 66
Crawford, NE 69339
308-665-1431

REGISTRATION APPLICATION

PLEASE PRINT OR TYPE

OFFICE USE ONLY

DATE RECD. _____

FEE PAID _____

RECEIPT NO. _____

BY _____

1. Cow 2. Pure-bred Jersey 8. Natural Single
 Bull Percentage (____%) A.I. (AI) Twin

Breed of dam _____ Embryo (E)

Color _____

Miniature Category (42" & Under)

Mid-Miniature Category (42" to 46")

3. _____
Name of Animal to be Recorded (not more than 24 letters
including prefix of your initials or Ranch prefix to insure your choice of name)

9. _____ / _____ / _____
Month Calved Day Year

4. _____
Height at withers Age when Measured

10. BREEDER:

5. _____
Identification (Tattoo, Tag, Etc.)

Name

5a. _____
Date of Ownership

Address, City, State, Zip

6. OWNER:

Name

11. _____
Signature of Breeder* (Owner of Dam at time of service.)

Address, City, State, Zip

12. _____
Date of Application

7. _____
Signature of Owner

OFFICE USE ONLY

REG NO. ASSIGNED

DATE REGISTERED