

MARITIME BEEF CATTLE TEST STATION

RAM APPLICATION FOR ENTRY

Breeder's Name: _____

Address: _____

Postal Code: _____

Telephone #: _____ **Fax #:** _____

Email: _____

Tattoo _____

Registration # _____

Dam _____

Sire _____

Dam Birth Date _____

Sire Birth Date _____

Breed _____

Lambing Period
(Start and End Dates) _____

Birth Date _____

Birth Weight _____

50-Day Weight _____

50-Day Weigh Date _____

Lambing Ease
 U- Unassisted
 E- Easy Pull
 H- Hard Pull
 M- Malpresented
 S- Surgical

Born as
 S- Single
 T- Twin
 TR- Triplet

Raised as
 S- Single
 T- Twin
 TR- Triplet

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