

All Information Must Be Typed or Printed AIN 15-DIGIT ATTACHED ID IS REQUIRED AT TIME OF ENTRY

1	Class	Animal Name	Date of Birth <small>Month/Day/Year</small>	<input type="checkbox"/> Canada <input type="checkbox"/> US	Registration Number	Tattoo	AIN 15-digit Number *REQUIRED*							
	Sire		Registration Number	Dam		Registration Number								
	Owner			<input type="checkbox"/> Junior Ownership		<small>(If different than owner)</small> Breeder		Bred & Owned Yes <input type="checkbox"/>						
	Address			City		State/Province								
City		State/Province	Postal Code											
<input type="checkbox"/> Record of Cow Herself		DHI Herd Code	Age <small>Years Months</small>	305d or less	Days	Milk	Lbs	Fat	%	Lbs	Protein	%	Lbs	Early Release
<input type="checkbox"/> Record of Dam <small>Young Animals</small>		Animal Ctrl Number		306-365 Day <small>(305d Required)</small>	Days		Lbs		%	Lbs		%	Lbs	Yes <input type="checkbox"/>

2	Class	Animal Name	Date of Birth <small>Month/Day/Year</small>	<input type="checkbox"/> Canada <input type="checkbox"/> US	Registration Number	Tattoo	AIN 15-digit Number *REQUIRED*							
	Sire		Registration Number	Dam		Registration Number								
	Owner			<input type="checkbox"/> Junior Ownership		<small>(If different than owner)</small> Breeder		Bred & Owned Yes <input type="checkbox"/>						
	Address			City		State/Province								
City		State/Province	Postal Code											
<input type="checkbox"/> Record of Cow Herself		DHI Herd Code	Age <small>Years Months</small>	305d or less	Days	Milk	Lbs	Fat	%	Lbs	Protein	%	Lbs	Early Release
<input type="checkbox"/> Record of Dam <small>Young Animals</small>		Animal Ctrl Number		306-365 Day <small>(305d Required)</small>	Days		Lbs		%	Lbs		%	Lbs	Yes <input type="checkbox"/>

3	Class	Animal Name	Date of Birth <small>Month/Day/Year</small>	<input type="checkbox"/> Canada <input type="checkbox"/> US	Registration Number	Tattoo	AIN 15-digit Number *REQUIRED*							
	Sire		Registration Number	Dam		Registration Number								
	Owner			<input type="checkbox"/> Junior Ownership		<small>(If different than owner)</small> Breeder		Bred & Owned Yes <input type="checkbox"/>						
	Address			City		State/Province								
City		State/Province	Postal Code											
<input type="checkbox"/> Record of Cow Herself		DHI Herd Code	Age <small>Years Months</small>	305d or less	Days	Milk	Lbs	Fat	%	Lbs	Protein	%	Lbs	Early Release
<input type="checkbox"/> Record of Dam <small>Young Animals</small>		Animal Ctrl Number		306-365 Day <small>(305d Required)</small>	Days		Lbs		%	Lbs		%	Lbs	Yes <input type="checkbox"/>

For additional animals, this form may be copied, downloaded from www.worlddairyexpo.com or request additional forms from World Dairy Expo.