

Transfer of Ownership

To register this animal in the U.S. Normande Organization in a new owners' name, this application for transfer of ownership with the original Registration Certificate must be completed and signed by the Last Recorded Owner.

Mail to: U.S. Normande Organization, PO Box 50058, Billings, Montana 59105

Animal Name	Registration No.	Herd Number
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Buyer / New Owner - (please print)

Date of Sale: _____

New Owner(s): _____ Member No: _____

Address: _____ Printed Name: _____

City: _____ State or Province: _____ Zip or Postal Code: _____

Phone Number(s): _____

Email Address: _____

If new owner is not a member - Please print name to appear on registration certificate - Farm or Ranch Name or Individual(s)' Name

Breeding Information - (for females only)

This animal was sold as being: Open Bred ET Recipient

If animal was sold as being bred, please complete the information below.

Bred Artificially:

Date(s) bred: _____ / _____ / _____ _____ / _____ / _____ _____ / _____ / _____

Sire: _____

Animal Name	Registration No.	Herd or Semen Code No.	Breed Association
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Bred by Natural Service:

Pasture exposure from Date: _____ / _____ / _____ through and including Date: _____ / _____ / _____

Sire: _____

Animal Name	Registration No.	Herd No.	Breed Association
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If an ET Recipient: (Please attach copy of ET Transfer Form - Original must accompany registration application of resulting offspring)

ET ID Number: _____ ET Transplant Date: _____ / _____ / _____

Authorized Signature

Please send transferred Registration Certificate to: Buyer Seller
(If no one is specified, the certificate will be sent to the Buyer)

As recorded owner or authorized agent of this animal, (I / we) hereby authorize the U.S. Normande Organization to transfer the ownership of this animal. (I/ we) certify that all information on this transfer is true and correct to the best of my/our knowledge, and understand that the Registry has the authority and duty to correct and/or cancel this transfer under the Rules and Regulations of the Registry. By submitting this document, (I / we) hereby agree to be bound by the terms and conditions of the U.S. Normande Organization.

Owner/ Agent Signature: _____ **Member No:** _____

Address: _____ **Printed Name:** _____

City: _____ **State or Province:** _____ **Zip or Postal Code:** _____

Phone Numbers: _____

Email Address: _____