

- Important  
 1. Type or Print Legibly  
 2. Proper fees must accompany all work

# AMERICAN MULEFOOT BREEDERS ASSOCIATION REGISTRATION APPLICATION

Phone: 785-456-8500 • PO Box 231, 305 Lincoln - Wamego, KS 66547 • Fax: 785-456-8599



Breeder # \_\_\_\_\_

Youth # \_\_\_\_\_

**BREEDER**  
*(Owner of Sow at Time of Mating)* \_\_\_\_\_

**ADDRESS**  
 ST. OR RT. \_\_\_\_\_ CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

**OWNER**  
*(Owner of Sow at Time of Birth)* \_\_\_\_\_

**ADDRESS**  
 ST. OR RT. \_\_\_\_\_ CITY \_\_\_\_\_ ST \_\_\_\_\_ ZIP \_\_\_\_\_

Leave Blank For Office Use Only	1 Private Farm Tag or Ear Notch	2 Litter Size	3 Breeding Type Nat. AL, ET	4 Farrowing Date	5 - Boar Registration Number	Name Private Farm Tag	6 - Sow Registration Number	Name Private Farm Tag	Date of Sale	7 - Transfer If sold, To Whom & Address <i>(enclose transfer fee)</i>
Sample	Huber 09-26	5	Nat	2-27-87	508070	Wilson 50	96199A	Huber 85-23		

**ATTENTION**  
 • Please sign as Sow or Boar Owner or Both  
 • Please Check Work for Accuracy.  
 • After Completion, Please Keep a Copy of this Form in Your File

DATE \_\_\_\_\_  
 DAYTIME PHONE \_\_\_\_\_  
 EVENING PHONE \_\_\_\_\_  
 FAX NUMBER \_\_\_\_\_  
 E-MAIL \_\_\_\_\_

SIGNATURE OF OWNER OF SOW *(time of farrowing)* \_\_\_\_\_  
 SIGNATURE OF OWNER OF BOAR *(time of mating)* \_\_\_\_\_

Applications completed by partnership must also bear signature of a person authorized to sign for account.  
*Signature above represents:*  
**"The information here is correct to the best of my knowledge and belief"**  
*Updated 11/1/16*