



www.cdnangus.ca
email: cdnangus@cdnangus.ca

142, 6715 – 8th Street, NE Calgary, Alberta T2E 7H7
Phone: (403) 571-3580 • Fax: (403) 571-3599 • Toll-Free: 1-888-571-3580

Sire Authorization Form

As owner of the following bull(s), I _____, _____
(print name) (Membership #)
hereby authorize _____, _____
(print name) (Membership #)
to register calves born in the year(s) _____.

Registration #	Tattoo	Name
Registration #	Tattoo	Name
Registration #	Tattoo	Name

Signature _____ **Date** _____

To be kept on record at the Canadian Angus Association.

Return the completed form to:
Canadian Angus Association • 142, 6715 – 8th Street N.E. • Calgary, AB • T2E 7H7
Fax: (403) 571-3599
email: registry@cdnangus.ca