Recipient Dam Input Form



For assistance in completing this form please contact the Member Services Team on 02 6773 4600 for assistance.

ecipient Dam Ident	Birth Year	Breed Code	Calf Ident (optional)	
erd ID/Year Letter/Tag	20	AAAA	Eg: MSOY1	
reby certify I am an authoris de in accordance with the Ar		and that the information given abo	ove is correct and that this applic	
ic in accordance with the Ar	igas society of the society	itales and Regulations.		
ned of Declarant:			Date:/	



Member Services Team Angus Society of Australia Locked Bag 11 ARMIDALE NSW 2350