ABERDEEN & NORTHERN MARTS Tel: 01467 623710 Fax: 01467 623777 e-mail: marts@anmgroup.co.uk Web Site: www.anmarts.co.uk ENTRY FORM FOR REGISTERED PEDIGREE BEEF BREEDING FEMALES PLEASE USE BLOCK CAPITALS			
DATE OF SALE:			
BREED:			
EXHIBITORS NAME:			
ADDRESS:			
ADDRESS.			
POSTCODE:			
TEL NO.:	MOBILE TEL NO.:		
EMAIL ADDRESS:			
FARM ASSURED: YES NO	FA No.:		
Please tick as appropriate CPH No.:			
I CERTIFY THAT THIS ANIMAL IS REGISTERED WITH THE APPROPRIATE BREED SOCIETY AND THE PEDIGREE AND EBV INFORMATION WILL BE ACCESSED DIRECT FROM THE SOCIETY.			
I DO NOT WISH TO HAVE MY EBV INFORMATION PRINTED IN THE Tick as appropriate			
Please Tick to confirm that your Charolais Cattle entered into the sale are from a CHECS BVD Accredited Herd, or are BVD Antigen TestedTick as appropriateNegative and are fully BVD Vaccinated.Tick as appropriate			
NAME OF ANIMAL:			
HB No:	EAR. No.:	EAR. No.:	
DATE OF BIRTH:			
PREFIX FOR PEN: Additional Information:			
ENTRY FEE: £48 including VAT. £24 refunded once the animal has been sold through ANM ALL CHAROLAIS CATTLE MUST BE DNA SIRE VERIFIED PLEASE ENSURE THAT THE CORRECT DOCUMENTS (i e PEDIGREE CERTIFICATE AND A HERD HEALTH DECLARATION FOR THE APPROPRIATE BREED SOCIETY) ACCOMPANY THIS ENTRY FORM.			
I / We wish to enter the above animal and hereby certify that the above female is registered with the appropriate Society and that the Pedigree will be available in their database.			
Signature:	Date:		

SERVICE DETAILS (FEMALES):		
SERVICE A.I. (TICK AS APPLICABLE)	DATE:	
OR RAN FROM:	TO:	
WITH / BY (GIVE NAME OF SERVICE BULL):		
H.B. No.:		
Th.D. 100.		
A.I. CERTIFICATES OR A LETTER OF SERVICE MUST BE SENT WITH ENTRY		
OTHER REMARKS:		