

APPLICATION FOR REGISTRATION RECOGNITION

Use this form when BOTH parents or the sheep is registered in another recognized registry. Please attach COPIES of registration papers. If BOTH parents are registered with UHHSA, please use the Application for Registration form. If ONE or BOTH parents are not registered with UHHSA or another recognized Registry, use the Application for Open Registry Inspection form.

Applicant Sheep Information: (Check all areas that apply)											•	Rev. 9/23/13				
	Breed Division BH – Black Haw									vaiian						
	Breeder Flock Prefix Sheep Name (Limit 25 Characters)															
	Date of Birth			ex Ewe Ram Wether			Birth Number S- Sin			ngle 🗌 TW- Twin 🔲 TR- Triplet [☐ QD- Quad (4) ☐ QT- Quint (5)		
	Color	□В	BLK – Black				Pattern Category				3					
Ear Type							Horn Type						Horn Color (s)		# of Horns	
	 N − Normal E − Elf G − Gopher 	\square M		ple Hor	b PE – Polled and (complete # of Horns otherwise distinguished)	section)				nonymous SH – Supracervical				id (1 Color) Not Applicable	Check here if any are fused	
Identification Information: None / No Identifiers – Skip to next section																
		ONLY if the	ie Tag Number 7 if the tag is on Sheep		Private Farm Tag Color / Number - ONLY if the tag is on Sheep	Ear L/R	Tattoo #	Ea L/I	r R	Microchip Number and Location	Resul – Att	don Test ts if known ach copy of o report	Any Other Unique/Ide INCLUDING O REGISTRY NAME AN ATTACH a copy of Reg		OTHER ND NUMBER –	
					/						☐ Q ☐ R	Q □ QR R				
Pedigree Information: Include all information known. Attach additional paper if necessary																
	Sire and Dam Information						Other Registry Name & Number – Attach COPIES of Registration Paper(s) Notes / Co						mments:			
	Sire Name															
	Dam Name															
Breeder Information: Owner of ewe at time of conception. Unknown – Complete Previous Owner Section																
	Breeders Name						Farm Name									
	Complete Address						Phone Numb					Number				
Previous Owner : If purchased from location that was not the breeder. N/A - purchased from a Breeder.																
Previous Owner										rm Name		Phone				
Complete Address										ck Prefix	ζ		Date Previous Owner Purchased (if known)			
J	certify that all is	nformation i	s accurate to	o the bes	t of my knowledge and tha	t anv sheer	submitted for	registrati	on me	ets the IJH	HSA. Inc	. Breed Stan	dards and	l registration read	irements.	
							e Sheep Purchased			Farm Name			Flock Prefix			
	Complete Address						Email									
	Phone						Toda						s Date			
Submit Application, Clear and Close Photos of Left and Right Side of the sheep, any necessary COPIES of I										Registration						
	For Office Use Only: Registrar Approval Date Paper(s), and \$8.00 Payment to: UNITED HORNED HAIR SHEEP ASSOCIATION, UHHSA Registrar, P.O. Box 161, New Lebanon, OH 45345															