

Cassia County 4-H/FFA Breeding Goat Declaration Form
DUE JUNE 16th

Exhibitor Name: _____

Commercial Division

Scrapie I.D.	Tag Number	Date of Birth

Fullblood Division (a copy of the official ABGA registration certificate **MUST** be attached to this form)

Registration Number	Registered Name	Right Tattoo	Left Tattoo	Date of Birth

Percentage Division (a copy of the official ABGA registration certificate **MUST** be attached to this form)

Registration Number	Registered Name	Right Tattoo	Left Tatoo	Date of Birth