



IMZA Reclassification Request

Please print or type and mail with your fee of \$10 (Youth \$5, Non-members \$20)

Use this form for upgrades from Appearance Certified to IMZA Foundation Pure

International Miniature Zebu Association

17500 Hamilton Arms Court, Dewitt, VA 23840

PHONE: (407) 717-0084 – EMAIL: ImzaInfo@gmail.com

Sex

- Bull
- Cow
- Steer

FOR OFFICE USE ONLY

Reg. No. Assigned

Date Registered

2. _____
Month Calved Day Year

3. _____
IMZA Birth Number or Registration Number

4. _____
Registered Name: (no more than 24 spaces)

5. _____
Identification (Tattoo, Tag, Chip, etc.)

6. _____
Height at Withers Age When Measured

7. _____
Private Herd Number you have assigned
this animal

8. _____
Owner Name

9. _____
Member Number

10. _____
Owner Address City State Zip Code

11. _____
Primary Contact Phone Number

12. _____
Alternate Contact Phone Number

13. _____
Email Address

Sire Registration Number

Sire Registered Name

Dam Registration Number

Dam Registered Name

Sire's Father Registration Number

Sire's Father Registered Name

Sire's Dam Registration Number

Sire's Dam Registered Name

Dam's Sire Registration Number

Dam's Sire Registered Name

Dam's Mothers Registration Number

Dam's Mother's Registered Name

Person completing this form (name) _____

I certify the above is a true and correct statement, and I desire to have same recorded in the International Miniature Zebu Association. In consideration of which, I agree to abide and be bound by the Articles of Incorporation, By-laws and Rules and Regulations of the Association and amendments, thereto.

15. _____
Owner Signature

16. _____
Date Signed