



IMZA Reclassification Request

Please print or type and mail with your fee of \$15 for members

Use this form for upgrades from Appearance Certified to IMZAFoundation 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