





**AUSTRALIAN LOWLINE CATTLE ASSOCIATION Inc.**

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**If more than 8 embryos in the flush then please also use the table below also**

Embryo No.	Grade: 1, 2, 3	Sexed Y/N	Split Y/N	Frozen = F	Transferred = T	Recipients (if applicable)			PTIC Y/N	Date Tested
						Breed Type	Year of Birth	Ear Tag No		

Breeder/Owner Signature .....

Date ...../...../.....

**Please forward completed form and Veterinarian Certificate to Lowline Registrar within 8 months after the flush together with the appropriate fee**

**Email: [lowline.registrar@abri.une.edu.au](mailto:lowline.registrar@abri.une.edu.au)**