

# International Kiko Goat Association, Inc.

## REGISTRATION FORM

This form is used to register a goat with the IKGA according to the classifications defined on this web site.

- 1. This application is for the following IKGA classification:** \_\_\_\_\_
- 2. Please list breeder information (the breeder is the owner of the dam at the time of conception).**  
Breeder Name \_\_\_\_\_ IKGA Number or Herd Prefix (if known) \_\_\_\_\_  
Address \_\_\_\_\_ City, State, Country, Zip \_\_\_\_\_  
Phone number \_\_\_\_\_ Email Address \_\_\_\_\_
- 3. Please list information about the animal submitted for registration.**  
Ear Tag # \_\_\_\_\_ Name \_\_\_\_\_ Date of Birth (MM/DD/YY) \_\_\_\_\_  
Birth weight \_\_\_\_\_ Animal's Percentage of Kiko \_\_\_\_\_  
Tattoo (Left Ear) \_\_\_\_\_ Tattoo (Right Ear) \_\_\_\_\_ Microchip Number \_\_\_\_\_  
Color of goat \_\_\_\_\_ Type of Breeding \_\_\_\_\_  
Early feeding method \_\_\_\_\_ Birth Rank \_\_\_\_\_  
30 Day Weight \_\_\_\_\_ 90 Day Weight \_\_\_\_\_ One Year Weight \_\_\_\_\_  
Horned? \_\_\_\_\_ Sex \_\_\_\_\_
- 4. Please list information about the sire of the animal submitted for registration**  
Sire's name \_\_\_\_\_ Sire's IKGA Registration # \_\_\_\_\_  
Sire's Classification \_\_\_\_\_  
Tattoo (Right Ear) \_\_\_\_\_ Tattoo (Left Ear) \_\_\_\_\_ Microchip Number \_\_\_\_\_  
Does the breeder own the sire? \_\_\_\_\_
- 5. Please list information about the dam of the animal submitted for registration**  
Transferred Animal's Dam's name \_\_\_\_\_ (and breed if not Kiko) \_\_\_\_\_  
Dam's Registration Number \_\_\_\_\_ Dam's IKGA Classification \_\_\_\_\_  
Tattoo Right Ear \_\_\_\_\_ Left Ear \_\_\_\_\_ Microchip Number \_\_\_\_\_

**6. Applicant's signature** "I verify as applicant that all information I have provided is true and correct to the best of my knowledge and that providing false information may result in my dismissal from the IKGA as set forth in the IKGA By-Laws. If not a member of the IKGA, I understand that my application may not be accepted for processing or subsequently revoked due to false and/or incomplete information."

Signed: \_\_\_\_\_

**7. Other comments** \_\_\_\_\_

**Make checks payable to: IKGA**

**P.O. Box 677**

**Jonesborough, TN 37659**