

## **Application for Registration Information**

Alpaca Owners Association, Inc. • 8300 Cody Dr, Ste A • Lincoln, NE 68512 402.437.8484 • www.AlpacaInfo.com

#### **Registration Fees**

All fees are to be paid with money order or personal check from a U.S. bank account in U.S. funds or via credit card.

Visit www.AlpacaInfo.com or contact the office for a credit card authorization form or the full fee schedule.

Less than 2-years-old
2-years-old and older
Non-nreeder and Gelding (any age) \$20.00
DNA Re-testing (if required) \$25.00

### Payment By Check Policy

Providing a check as payment authorizes AOA to use the information from the check to make a one-time electronic fund transfer or to process the payment as a check transaction. If an electronic fund transfer is done, the financial institution will not return the check and funds may be withdrawn from the account on the same day the check is received.

Complete all sections of the registration and send to the office along with payment. Failure to complete all sections will delay your application.

#### **Color Choice**

Use the Natural Color Fiber Chart to determine your alpaca's colors. Charts can be purchased from the AOA website. Part the alpaca's fiber and match the fleece color closest to the skin to the color chart. If the color is between two colors, pick the darker shade. The 16 natural alpaca fiber colors are:

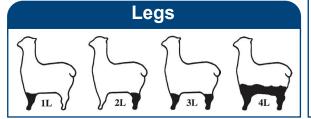
White 100 WH	Medium Brown 301 MB	Dark Silver Grey 404 DSG
Beige 201 BG	Dark Brown 410 DB	Light Rose Grey 408 LRG
Light Fawn202 LF	Bay Black 360 BB	Medium Rose Grey 211 MRG
Medium Fawn 204 MF	True Black 500 TB	Dark Rose Grey 306 DRG
Dark Fawn 205 DF	Light Silver Grey 401 LSG	

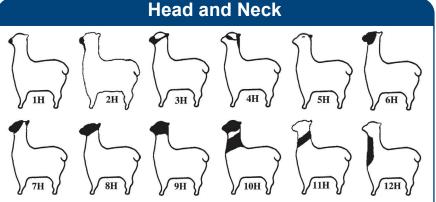
Medium Silver Grey . . 402 . . MSG

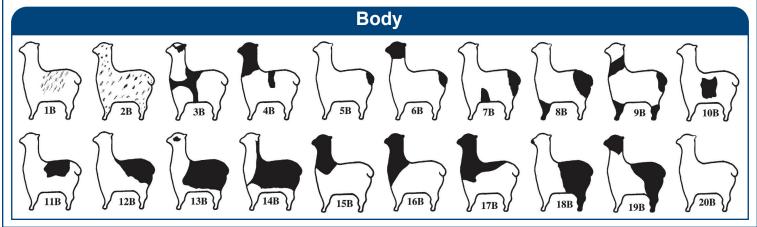
#### **Alpaca Color Patterns**

Choose the color patterns that most closely represents your alpaca's patterns. The dark portions of the diagrams represent the pattern.

Light Brown . . . . . . . 209 . . LB









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Indicated Owner Registering T		Additional Ind	licated Owner Registering To			
Acct Number: (must have prior to r			(must have prior to registration)			
Name (first & last):			<del></del>			
Phone Number:						
Email:		Email:				
Indicated Owner Signature						
Signature (only one is necessary):						
More than two indicated owners? Attach additional sheets with the above information.						
	Cria Info	rmation				
Barcode Number (back of blood card):		(This number t	pecomes the alpaca's registry number for life.)			
Was this alpaca born as a result of artificial inseminat			es, Semen Collection Date:			
Man this always have an availe of owners transfer (F	T)2 (simple on	an Van Na	month / day / year			
Was this alpaca born as a result of embryo transfer (E If ET Alpaca, Do you certify that the recipient dam is a		-	mbryo Implant Dato:			
il El Alpaca, Do you certify that the recipient dam is a	ii aipaca r (cii	rcie orie). Tes No E	month / day / year			
Estimated Date of Conception: month / day / year	Date of Birth	n: month / day / year	Breed (circle one): Huacaya Suri			
Gender (circle one): Female Male Gelding Fen	nale Non-bree	, ,				
Contact (choice cho). I children intale coloning I children	naio mon bioc	Male Hell breeder	Date Marked Non-breeder/Gelding			
Breeder Identifier to be used in name (if desired):			_			
`	eeder ID] Alpad		[Breeder ID]'s Alpaca Name			
-	aca Name [Bre	_	Alpaca Name of [Breeder ID]			
Alpaca Name (without Breeder ID)—First Choice:						
Alpaca Name (without Breeder ID)—Second Choice:_						
Country of Birth: Secondary Country Color: Secondary Color: Secondary Colors Secondary Secon						
Must select color(s) from the AOA Natural Color Fiber Chart (for g	yreatest accurac	I nird cy, check fleece closest to sk	kin) or the color list on the application form.			
Pattern-Head: Pattern-Legs: Pattern-Body:						
Select the patterns from the diagrams on the application form. Please select the patterns that most closely represents your alpaca.						
Microchip Number: Manufacturer (circle one): Avid Destron Other:						
Chip Location (circle one): Base of Right Ear Base of Left Ear Base of Tail Other:  Ear Tag Number: Tag Location (circle one): Right Ear Left Ear						
Birth Weight (must be taken on date of birth): Date Taken:						
Birthing Ease: Date Taken: Weaning Weight: Date Taken:						
Date lakeli						
Sire of Cria Listed		Da	am of Cria Listed			
Registry Number:		Registry Number:				
Name:						
Acct. Number:	Acct. Number:					
Signature (sire owner at time of breeding):		Signature (dam owne	er at time of birth):			
			<del>-</del>			
		Signature (dam owne	er at time of conception):			