

## WEANING WORKSHEET INSTRUCTIONS

If you are enrolled in the CHR program, this form will come preprinted with all the information you have provided in the Birth Worksheet and Registration Application. If you are not enrolled in the CHR program, you may complete a blank Weaning Worksheet for informational purposes and submit to the ARPA office.

On the preprinted form, please be sure to review the information and verify it is correct. If there are any corrections that need to be made, please make notes on the form to the correct information or complete a blank form with the corrected information.

1. **BREEDER # OR MEMBER#** – List your Breeder or Member number you have with ARPA.
2. **NAME** - List your name.
3. **PAGE#** – If sending in multiple pages, please number the pages accordingly.
4. **DAM REG#** - List the registration number of the DAM of the calf you are reporting a weaning weight for.
5. **SIRE REG#** - List the registration number of the Sire of the calf you are reporting a weaning weight for.
6. **CALF REG#** - List the registration number of the Calf of the calf you are reporting a weaning weight for.
7. **CALF TATTOO** – Enter the tattoo that has been placed in the calf's ear.
8. **BIRTH DATE** -Enter the number of the month, day and year born. MO/DA/YR (00/00/00) of the calf you are reporting a weaning weight for.
9. **BW** - List actual birth weight in pounds of the calf you are reporting a weaning weight for. The calf should be weighed within 24 hours of birth. If no birth weight is provided the assumed weight of 80 pounds for bulls/steer and 75 pounds for heifers will be used for calculations.
10. **SEX** – B for Bull, S for Steer, H for Heifer.
11. **WEAN DATE** -Enter the date in which the calf was weighed upon weaning. MO/DA/YR (00/00/00)
12. **WEANING WEIGHT**-Enter the weight that was taken on the wean date of the calf you are submitting a weaning weight for. Weaning weights must be taken 160 to 250 days of age.
13. **GROUP CODE** – This field is used to identify management groups or contemporary groups that are all managed together. All calves managed similarly should have the same numeric group code, 1 for the first group, and 2, 3, 4 etc. for subsequent contemporary groups. Heifers, bulls, and steers can be in the same group but heifers will be compared to heifers, bulls compared to bulls, and steers compared to steers.
14. **COW WEIGHT** – Enter the DAM's weight of the calf you are reporting a weaning weight for, if you have taken it upon weaning of the calf.
15. **CALF NAME** – Enter the registered name you would like to use for the animal. The name is limited to the first 30 characters.
16. **REG NOW** – Enter “Y” for calves that are to be registered if the calf has not been previously registered.
17. **DISP CODE** – Enter the disposal code for the calf you are reporting a weaning weight for if the animal has been sold, culled, or died. See the Disposal codes listed at the bottom of the Weaning Worksheet.
18. **SIGNATURE** – Please sign the form, affirming that the information contained in the application is correct.
19. **SEE REVERSE SIDE** – Enter an “X” for transfers upon entry and complete the reverse side of the application.

## **WEANING WORKSHEET REVERSE SIDE INSTRUCTIONS**

If an animal has been sold, the owner/seller may transfer the animal upon registration entry by completing the reverse side of the Weaning Worksheet.

1. **BREEDER # OR MEMBER#** – List the Breeder/Seller’s Member number.
2. **NAME** - List the name of the Breeder/Seller.
3. **PAGE#** – If sending in multiple pages, please number the pages accordingly.
4. **DATE OF SALE** – Enter the date the animal was sold.
5. **CALF# FROM FRONT** – Enter the number of the line in which the calf was listed on the front of the Weaning Worksheet. For example, if the calf was listed on line 15, enter 15.
6. **BUYER’S MEMBER #** – Enter the breeder number or member number of the person who has purchased the calf.
7. **NAME** – Enter the name of the person who has purchased the calf.
8. **ADDRESS** – Enter the address of the person who has purchased the calf.
9. **PHONE**– Enter the phone number of the person who has purchased the calf.
10. **SIGNATURE** – Please sign the form, affirming that the information contained in the application is correct.