

National Junior Belted Galloway Association Artificial Insemination Project



The NJBGA Artificial Insemination Project was founded in 2002 to provide junior members the ability to obtain quality genetics for their breeding program. A junior member in good standing with the Belted Galloway Society, Inc (dues paid) is eligible to apply for the semen. What a great way to incorporate superior genetics into your breeding program!

Official Rules:

- 1. Applicants must be in good standing as a junior member of the Belted Galloway Society, Inc. A junior member is anyone with paid dues ages 8-21 years old.**
- 2. The application must include a copy of their purebred female's registration paper at the time of application, along with their member number. Only one female may be used in the project year.**
- 3. All offspring occurring from the mating must be initially registered in the junior member's name.**
- 4. Semen certificates that are required for registration will not be issued until all paperwork required for the project has been completed.**
- 5. The NJBGA member is responsible for shipping and handling costs.**
- 6. Any calf born from a mating made with the BGJA provided semen that is unauthorized, will not have a semen certificate issued for its registration.**
- 7. Any unused semen is to be documented at the end of each project year. It can either be returned, or stored and used to re-apply the next year.**
- 8. Initially 5 straws of semen from the donor bull of the junior's choice will be shipped to the junior member (at their expense).**
- 9. After the birth of the calf, documentation of birth weight, animal markings and sex of the animal will be a requirement before semen certificates can be released from the donor farm.**

NJBGA Artificial Insemination Project

Every attempt will be made to honor the junior member's request, but some quantities are limited.

Application process:

1. Complete an application with all signatures.
2. Submit female's registration paper along with application.
3. Mail application to: Corinna Caron, 151 Nokomis Rd, Corinna ME, 04928
4. Once the application has been received and shipping paid for the semen will be shipped to the junior address provided.

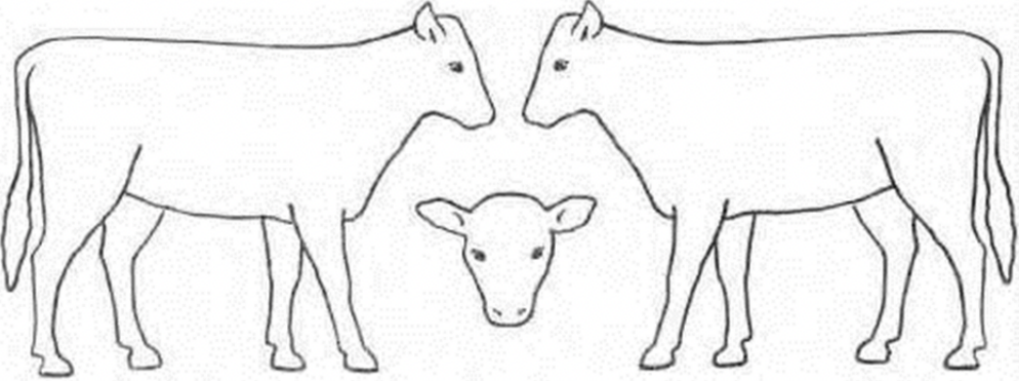
Artificial Insemination Project Application

Name		Age	Date
Address:			
Phone		Parent's Name	
Belted Galloway Society Member #		Bull Semen Requested	
Please document the Belted Galloway heifer or cow that you own who will be artificially inseminated with the semen used in this project. Attach a copy of the front and back of animal's registration paper.			
Name of Animal:		Please Circle: Heifer Cow	
Registration #	Where would you like the semen shipped:		
	Name:		
	Address:		
Junior: By signing this application, I certify that I am a BGJA member is good standing that has paid my dues for the current year. I am required to use the straws of semen obtained to impregnate only the Belted Galloway cow or heifer stated above. If I attempt to substitute another animal, my project will be terminated. I realize that this is an ongoing project, and failure to return the proper documentation will delay registration of any calf. I also understand that any offspring produced will be mine to keep.			

Junior's Signature	Date
Parent: By signing this application you certify that you agree with the rules listed above for your junior member. In addition, you understand that you must pay for the shipping charges associated with the semen. You also certify that you have the means to keep the semen (tank & storage) or have access to the means. As the parent, you promise to assist to ensure a positive outcome for the junior member.	
Parent's Signature	Date

NJBGA Insemination Project Completion

Calf Name:	Sex
Birthdate:	Birth weight:
Sire:	Dam:



Sketch color pattern, outline belt and other white areas--note areas not shown

Junior: By signing this application, I certify that I am a BGJA member in good standing that has paid my dues for the current year. I am required to use the straws of semen obtained to impregnate only the Belted Galloway cow or heifer stated above.	
Junior's Signature	Date
Parent: By signing this application, I certify that my child has represented all information in this project factually.	
Parent's Signature	Date
Number of semen straws remaining in your possession.	Will you return or retain for next year?

Send all correspondence to: Corinna Caron, 151 Nokomis Rd, Corinna ME, 04928
executivedirector.bgs@gmail.com 608-220-1091

