



# TN Beef Heifer Development Program

## Consignment Form

### Producer Information

Name:    
*Last* *First*

Address:   
*Street Address* *E-mail Address*

*City* *State* *ZIP Code*

Phone:  BQA Number (if known):

### General Heifer Information

Season Born: <input type="radio"/> Spring (January – March) <input type="radio"/> Fall (September – November)	
Number consigning: <input style="width: 50%;" type="text"/> <small>(**Remember to include individual heifer information on the second page of this form.**)</small>	Polled or Dehorned: <input type="radio"/> Yes <input type="radio"/> No
<input type="radio"/> Registered (**if registered please include heifer registration numbers with your form)	<input type="radio"/> Commercial

### Marketing

**At the end of the program, you have the choice to take the heifers back to your farm or have them marketed as bred replacements. Heifers confirmed pregnant are eligible to be sold in an associated TBHDP-branded sale or through private treaty, depending on numbers.**

<input type="radio"/> Sell	<input type="radio"/> Keep	If "Sell", how many: <input style="width: 90%;" type="text"/>
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### Pre-Delivery Management Details

- Enter the specific information for each heifer on the second page of this form
- Each heifer must have received at least one round of vaccination for the following diseases more than two weeks prior to delivery
- The sire of each heifer must be registered but the sire does not need to meet any specific requirements other than registration with a breed association
  - For heifers born to multi-sire breeding groups, include the registration number for all the sires in that group
- Heifers weighing less than 500 pounds at delivery will be assessed for frame and muscle score and
  - If lightweight heifers are judged to be unlikely to reach target breeding weight prior to the beginning of the breeding season, they will not be admitted into the program
- Health Certificates are not required for heifers originating from TN

Send form to: [jrhinehart@utk.edu](mailto:jrhinehart@utk.edu) or Justin Rhinehart; PO Box 160, Spring Hill, TN 37671

	Heifer ID	Estimated Delivery Wt.	Date of Birth	Sire's Reg. #	Breed Type	Blackleg 7- or 8-Way Clostridial		Respiratory IBR, BVD, PI3, BRSV	
						Product	Date Given	Product	Date Given
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