



PO BOX 209 Stephenville, TX 76411 / 1-844-588-2322 / Website: <https://dextercattle.org>

## Authorized Representative Form American Dexter Cattle Association

This form is to authorize another ADCA member to submit registrations  
and transfers on your behalf.

Effective Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

End Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

### Current Owner of Record requesting a Representative:

Name: \_\_\_\_\_ ADCA

Member number: \_\_\_\_\_

Herd Name: \_\_\_\_\_

### ADCA member to become the Representative for Owner of Record:

Name: \_\_\_\_\_ ADCA

Member number: \_\_\_\_\_

I, \_\_\_\_\_, \_\_\_\_\_ hereby grant full animal registration and  
*(print owner of record member name)* *(ADCA member #)*

transfer authority for:

Choose one:  Entire herd  Listed animals:

the \_\_\_\_\_ to my Authorized Representative  
*( herd name/animal(s) )*

\_\_\_\_\_, \_\_\_\_\_  
*(print authorized representative member's name)* *(ADCA member #)*

Owner Signature \_\_\_\_\_

\_\_\_\_\_  
(date)

Authorized Representative Signature \_\_\_\_\_

\_\_\_\_\_  
(date)