



Application for Registration Animals without IFGA Registered Parents

Mail To: GLM Registry/IFGA 19508 Tiller Trail Hwy, Days Creek, OR 97429
Make Checks Payable to: IFGA or check box to request a PayPal Invoice ☐

International Fainting
Goats Association

Email unformatted photos to: ifga@glmregistry.com

Must send Right, Left & Down (fainting) images.

Member (submitting application) # _____
Name: _____
Phone: _____
Email: _____

Category Descriptions

Certified Premium: Parents are registered with another organization
Heritage: One or both parents not registered with any organization

Reg# _____ (GLM to assign)

Category: _____ *CP: _____ H: _____
Herd Prefix & Name: _____
DOB: _____ #in Birth: _____ #Buck: _____ #Doe: _____
Sex: Doe: _____ Buck: _____ Whether: _____ Horned: _____ Polled: _____ Disbudded: _____
Color Description: _____ Eye Color: _____
Marks/Characteristics: _____
R Ear Tattoo: _____ L Ear Tattoo: _____ Scrapie: _____ Microchip: _____
Mini (must be over 3yrs) Buck (less than 23") Height: _____ Doe (less than 22") Height: _____

*Sire Reg# _____
*Sire Name: _____
*Owner at time of Service: _____
*Dam Reg# _____
*Dam Name: _____
*Owner at time of Service: _____

Owner at time of Birth

IFGA#

Current Owner

IFGA#

Mail Certificate to: _____

Reg# _____ (GLM to assign)

Category: _____ *CP: _____ H: _____
Herd Prefix & Name: _____
DOB: _____ #in Birth: _____ #Buck: _____ #Doe: _____
Sex: Doe: _____ Buck: _____ Whether: _____ Horned: _____ Polled: _____ Disbudded: _____
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*Dam Reg# _____
*Dam Name: _____
*Owner at time of Service: _____

Owner at time of Birth

IFGA#

Current Owner

IFGA#

Mail Certificate to: _____

I certify that all information herein is true and accurate to the best of my knowledge and belief: _____

Signature & Date