



AUSTRALIAN BRAHMAN BREEDERS' ASSOCIATION LIMITED

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Affiliation Certificate

I/We agree to affiliate our membership with the following member:

Name.....

Address

Membership No:

This will allow the above member to register calves from our Sires/Dams:

Signed.....

Name.....

Address

Membership No:

Note

Click on the **SUBMIT BUTTON** to submit this form to ABBA **or**
Save this form to your Desktop, attach this pdf to any email program and send to ABBA at: kerria@brahman.com.au **or**
Save this form to your Desktop print it out on your printer and fax in to: 07 **4922 5805**.

YOU WILL RECEIVE AN EMAIL TO CONFIRM THIS AUTHORISATION OR CALL KERRI AT ABBA ON 07 4921 4726 TO CONFIRM BY PHONE