INDIVIDUAL GOAT RECORD (circle one) **Doe** **Wether** **Buck**

Name / Identification: _____ Breed: _____ Scrapie ID: _____ Herd ID: _____

Date of Birth: _____ Registration #: _____ Tattoo: _____

Sire
Name: _____
Breed: _____
Type of Birth: _____
Grand Sire
Grand Dam

Type of Birth: Single Twin Triplet Other _____ Type Rearing: Single Twin Triplet
Dam raised Bottle/bucket raised

Description: _____
Coloring: _____

Dam
Name: _____
Breed: _____
Type of Birth: _____
Grand Sire
Grand Dam

Ears: Pendulous Upright Other _____ Horns: Disbudded Polled Horned

Adjusted Weights: _____ 60 days _____ 90 days _____ 120 days Yearling Weight: _____ Other Weight: _____

Breeder: _____ Date Acquired: _____ Date Sold: _____

Premise ID _____

Production Record: (use one line for each kid)

Identification Tag	ID Tag / Tattoo	Date of Birth	Days of Gestation	Sire	Birth Weight	Sex	Type of Birth (single, twin, triplet)	Type of Rearing (sgl, twin, triplet)	Dam or Bucket or Bottle Raised	Date Weaned	Days of Age at Weaning	Wean Weight	Remarks / Notes

Health Management Record:
(disbudding, vaccinations, deworming, castration, etc.)

List dose, serial #, withdrawal time for meds.

Date	Condition or Diagnosis	Treatment