Nebraska Bull Test 2025-26 Enrollment Form - pg 1

Consignor Information (a	as you want listed	on the we	ebsite)		_				bulltest@gm	i <mark>ail.com</mark> ai		ard copy v	
Ranch Name								when you c	leliver your bu 35th St		s can be ma In, NE 6850		20 North
Contact (First / Last Name)									g below, you a Bull Test ru				
Complete Mailing Address									bide by the p				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Email													
Phone 1 / contact								Owner S	ignature:				
Phone 2 / contact									Date:				
NBT BULL ENROLLMENT: Plea would like lot tags assigned; the the catalog by consignor. Registered Name of Consignment Animal				Tattoo	Breed	Registration# (REQUIRED)	**Must be <85 lb BW, BW EPD 1.5 or less and producer recommended Calving Ease Class (check those that qualify as CE)**	**Must bring paperwork to checkin Negative PIBVD (check if tested neg)**	DOB	BW (Actual)	Wean Wt (Actual)	205d Weight	205d Ratio

^{**}All registration numbers and complete contact information must be provided to the test managers no later than the 60 day test weigh date or cattle will be ineligible for performance reports and sale.

^{**}Please refer to the Nebraska Bull Test 2025-2026 official rules for all details and deadlines.

Nebraska Bull Test 2025-26 Enrollment Form - pg 2

Consignor Name:										
Test Fees:		1	OFFICE USE ONLY							
Total hd count delivered:		hd	Amount Recd							
1st Pymt \$400 / hd:	x \$400	50% of test fee due on delivery	Check #							
Total Due at delivery:			Date Recd							
**2nd pymt \$400/hd due on Jan 10										
Vaccination Records	Please indicate the date	and product(s) given to meet the requi	rements of the receiving protocol	I. Vaccinations should be giv	ren 3-4 weeks prior to delivery to the	bull test locatio				
	Please consult your loca	al veterinarian for recommended in-hero	d protocols. Contact Dr. Sierra R	ush, DVM at Rice Veterinary	Clinic (308.870.6761) for questions al	bout NBT protoc				
7-way Blackleg		(ex 7-way, Vision 7, 7-way + Som; may be in combin	nation with Somnus)							
IBR PI3										
BVD		commonly together (ex Bovi Gold products, Visi	ta 5 / Vista Once, Pyramid 5, etc)							
BRSV		.]								
5-way Lepto		ex Pyramid 10, VL5+L5, PregGuard 10, etc; commo	only together with the 4 or 5-way vaccine abo	ove)						
Haemophilus Somnus	(ex Somubac, 7-way + Som; may be in combination with 7-Way)									
Pastuerlla Haemolytica	(ex Presponse, Once PMH, Bovi Gold One Shot; may be in combination with other vaccines such as Pyramid 5+ Presponse, Bovi Gold One Shot, etc)									
Deworm / Lice Control										
Other										
PIBVD Test Results	You MUST provide a co	opy of your test results showing individ	ual tag numbers and negative PIE	BVD testing upon arrival at th	e bull test location					
OFFICE USE ONLY										
Date Recd:										
Approved:										
		•								
Registration Information	Cattle registration num	ibers MUST be provided no later than th	oo 60 day taat waigh data ar aattle	will be inclaible for perform	anaa ranarta and hull cala					
		of the registrations papers but it is high	•	• •	•					
OFFICE USE ONLY			,							
Date Recd:										
Approved:										
Comments:	Ī									
- Commonton						1				