

Bison Semen Evaluation Form

Eastern Bison Association
7010 Hynson Road
410-754-5821 410-754-5822 Fax

This form **must accompany the Health Papers** and is to be used for Yearling Bulls and 2 Year Old Bulls attending the EBA Show & Sale. A bull must be tested on or after November 1, 2009. This information is **required** to enter Yearling and/or 2-Year-Old Bulls into the Show & Sale. **Failure to provide this information will disqualify an animal from the Show & Sale.**

Owners: _____ Ranch: _____

Address: _____

City: _____ State: _____ Zip/Postal: _____

Phone: _____ Fax: _____

Examination Date: _____

Bull Name: _____ EBA Ear Tag No.: _____

Ranch Ear Tag No: _____ Brucellosis Metal Test Tag No.: _____

SCROTAL CIRCUMFERENCE MEASUREMENT _____

MORPHOLOGY SCORE _____
EBA minimum morphology score allowed (70%)

Motility Score _____
EBA minimum motility score allowed (30%)

Classification: Interpretation of data resulting from this examination would indicate, to the best of my knowledge, that this bison bull is in satisfactory physical condition, has satisfactory semen quality, and would be a satisfactory potential breeding bull. Unless otherwise indicated below this bison bull has been examined only for physical soundness and quality semen. No special diagnostic tests were made for possible venereal disease or other infection.

Signature of Veterinarian

Veterinarian Name (please print)

Address: _____

City/State: _____ Zip/Postal Code: _____

Phone: _____ Fax: _____

Remarks: _____