

# Indiana State Dairy Association

Elizabeth Straw - Executive Secretary

270 South Russell St

West Lafayette, IN 47907

(765) 494-8025

Efarrow@purdue.edu

# Register For DHIR With ADGA

**AMERICAN DAIRY GOAT ASSOCIATION**  
APPLICATION FOR ENTERING A NEW HERD ON  
**OFFICIAL DHIR TESTING – INCLUDES ADGA PLUS**

Name of Herd Owner \_\_\_\_\_  
ADGA ID #'s of additional members or partnerships with animals managed in this herd \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
Date of Application \_\_\_\_\_ Date of First Expected Test \_\_\_\_\_

\* If OS 40 for AR is being applied for, documentation of your tester training must be included with this application.

Type of Test: <input type="checkbox"/> Group <input type="checkbox"/> Standard <input type="checkbox"/> Owner	TEST TYPE PLAN: <input type="checkbox"/> DHER 10-Standard <input type="checkbox"/> ADGA ITP 00-EOM	<input type="checkbox"/> ADGA ITP 02-APCS <input type="checkbox"/> DHER 12-APCS <input type="checkbox"/> DHER 23-AP (bulk tank req.)	<input type="checkbox"/> DHI 40 Owner/Sampler AR * <input type="checkbox"/> DHI 40 Owner/Sampler ST
Tester: Name, ID#, Telephone/Email: _____		Name of DHIA: _____	
DRPC: <input type="checkbox"/> AgSource <input type="checkbox"/> Amelcor (DHI Prove) <input type="checkbox"/> DRMS (Raleigh) <input type="checkbox"/> AgriTech Analytics			
MEMBERS OF TESTING GROUP (List Group Leader first)			
Name/Tester ID #	ADGA ID #	Telephone/Email	
<input type="checkbox"/> Annual Herd New Herd Test Fee 1-5 does \$ 45.00 <input type="checkbox"/> Annual Herd New Herd Test Fee 6-25 does \$ 50.00 <input type="checkbox"/> Annual Herd new Herd Test Fee 26+ does \$ 75.00 I also would like to add: <input type="checkbox"/> ADGA PLUS enrollment & 3 DNA tests \$ 70.00 <small>includes subscription reports for 2018</small> Amount Enclosed \$ _____		<input type="checkbox"/> Check Enclosed Check # _____ <input type="checkbox"/> VISA/MasterCard Exp. Date _____ Card # _____ <small>Currently, ADGA PLUS requires participation in DHIR and the DNA program. Linear is being assessed for 2021 and can be added or your carried over application from 2020 can be applied once the status of the program is determined. Please check box(es) at left.</small>	

DHI Herd Code # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ (Standard Breed)

I understand that it is my responsibility to know and abide by all NCDHIP, DHIA, and ADGA testing rules. I understand that any fraudulent practice in feeding, care, or management of my does on test that is intended to cause, or does cause an abnormal yield of milk, butterfat, protein, or is intended to influence rolling herd averages or USDA genetic evaluations is a violation of NCDHIP and ADGA rules. I understand that any violation of these rules may cause the rejection, or the expunging and canceling of the record, and, in addition may cause me to be denied the use of and privileges of DHIR Testing.

Signature of Owner \_\_\_\_\_ ADGA ID# \_\_\_\_\_

## Annual New Herd Test Fee

- 1-5 Does \$45.00
- 6-25 Does \$50.00
- 26+ Does \$75.00
- ADGA Plus Enrollment & 3 DNA Tests \$70

January 31<sup>st</sup> Deadline Does Not Apply to New Herds

# Register For DHIR With ADGA

**AMERICAN DAIRY GOAT ASSOCIATION**  
APPLICATION FOR ENTERING A NEW HERD ON  
**OFFICIAL DHIR TESTING – INCLUDES ADGA PLUS**

Name of Herd Owner \_\_\_\_\_  
ADGA ID #'s of additional members or partnerships with animals managed in this herd \_\_\_\_\_  
Mailing Address \_\_\_\_\_  
Date of Application \_\_\_\_\_ Date of First Expected Test \_\_\_\_\_

\* If OS 40 for AR is being applied for, documentation of your tester training must be included with this application.

Type of Test: <input type="checkbox"/> Group <input type="checkbox"/> Standard <input type="checkbox"/> Owner	TEST TYPE PLAN: <input type="checkbox"/> DHER 10-Standard <input type="checkbox"/> ADGA ITP 00-EOM	<input type="checkbox"/> ADGA ITP 02-APCS <input type="checkbox"/> DHER 12-APCS <input type="checkbox"/> DHER 23-AP (bulk tank req.)	<input type="checkbox"/> DHI 40 Owner/Sampler AR * <input type="checkbox"/> DHI 40 Owner/Sampler ST
Tester: Name, ID#, Telephone/Email: _____		Name of DHIA: _____	
DRPC: <input type="checkbox"/> AgSource <input type="checkbox"/> Amelcor (DHI Prove) <input type="checkbox"/> DRMS (Raleigh) <input type="checkbox"/> AgriTech Analytics			
MEMBERS OF TESTING GROUP (List Group Leader first)			
Name/Tester ID #	ADGA ID #	Telephone/Email	
<input type="checkbox"/> Annual Herd New Herd Test Fee 1-5 does \$ 45.00 <input type="checkbox"/> Annual Herd New Herd Test Fee 6-25 does \$ 50.00 <input type="checkbox"/> Annual Herd new Herd Test Fee 26+ does \$ 75.00 I also would like to add: <input type="checkbox"/> ADGA PLUS enrollment & 3 DNA tests \$ 70.00 <small>includes subscription reports for 2018</small> Amount Enclosed \$ _____		<input type="checkbox"/> Check Enclosed Check # _____ <input type="checkbox"/> VISA/MasterCard Exp. Date _____ Card # _____ <small>Currently, ADGA PLUS requires participation in DHIR and the DNA program. Linear is being assessed for 2021 and can be added or your carried over application from 2020 can be applied once the status of the program is determined. Please check box(es) at left.</small>	

DHI Herd Code # \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ (Standard Breed)

I understand that it is my responsibility to know and abide by all NCDHIP, DHIA, and ADGA testing rules. I understand that any fraudulent practice in feeding, care, or management of my does on test that is intended to cause, or does cause an abnormal yield of milk, butterfat, protein, or is intended to influence rolling herd averages or USDA genetic evaluations is a violation of NCDHIP and ADGA rules. I understand that any violation of these rules may cause the rejection, or the expunging and canceling of the record, and, in addition may cause me to be denied the use of and privileges of DHIR Testing.

Signature of Owner \_\_\_\_\_ ADGA ID# \_\_\_\_\_

Name of DHIA - Indiana State Dairy Association

DPRC - DRMS (Raleigh)

Herd Code # - Assigned By ISDA Once Contact Information Is Provided

# Test Types

- ▶ DHIR 20 - Supervisor weighs and samples both milkings on test day. Verification Test required for Top Ten Awards.
- ▶ DHIR 22 - Supervisor collects both test day weights. Supervisor also collects component samples alternating AM and PM samples each month. Annual herd Verification Test and minimum DCR of 93 required for Top Ten Awards.
- ▶ DHIR 40 O/S - Owner/Sampler weighs and samples each month and is responsible for sending in samples and paperwork.
  - ▶ For Star Recognition - A minimum DCR of 75 is required plus a herd verification test when the herd is 60-150 Days in Milk.
  - ▶ For Advanced Registry - Requirements for Star recognition. In addition the animals must have 240 days in milk, 8 tests and the owner must provide documentation to ADGA regarding training. This is for those interested in 10 months of testing each year.

# DHIR Certification With ISDA

- ▶ Certification Is Valid For 2 Years
- ▶ Certification Costs \$30
- ▶ Confirmation Of Certification Will Be Faxed To ADGA And Mailed To Individual

# Herdcode Information

## 32185500

First Two Digits Are The State

32 - Indiana

Second Two Digits Are The County

18 - Delaware

Last Four Digits Are Random

Assigned By DHIA Service Affiliate

# Required Testing Information

- ▶ Doe Registration Number & Breed
  - ▶ Index/Tag Number For Doe
- ▶ Date of Birth
- ▶ Dam & Sire Registration Numbers
- ▶ Kidding Date

**American Dairy Goat Association**  
ADGA Registry, based on original import records, is your guarantee of good breeding and worldwide acceptance. Since 1904  
P.O. Box 660, 101 W. Main Street, Spindale, NC 28150 (828)386-5881 Fax (828)387-0476 www.ADGA.org

**Certificate of Registry**  
PUREBRED NIGERIAN DWARF

NAME: **BUTTIN' HEADS CALLIGRAPHY** REGISTRATION ID: **D1652360P**

SIRE: **D1633652P \*DNA\*** SIRE'S SIRE: **D1544044P**  
**DRAGONFLY HLJ CALVARY** **DRAGONFLY HFX HALLELUJAH**

SIRE'S DAM: **D1401804**  
**SG AGS FLAT ROCKS HERE FOR THE PARTY**  
LA2012, 2011, 2009

DAM: **D1417026 \*DNA\*** DAM'S SIRE: **D1391801**  
**GCH BUTTIN' HEADS PAPERCLIP** **BUTTIN' HEADS PAJAMARS**  
2\*M AR2011 ST2012 LA2014, 2013, 2011 **++B ST2011**

DAM'S DAM: **D1329646**  
**GCH BUTTIN' HEADS ZIPPER PEA**  
1\*M AR2011 LA2013, 2011

DESCRIPTION: **BROWN/RED BUCKSKIN**  
SEX: **DOE** DATE OF BIRTH: **05/04/2013**  
HORN INFORMATION: **POLLED** TATTOO: **RE: BTH LE: D10**  
EAR INFORMATION: **ERECT**  
BRED BY:  
OWNED BY:

ISSUE DATE: **09/10/2014**

TO VERIFY AUTHENTICITY OF THIS CERTIFICATE, RUB OR BREATHE ON THE OVAL. COLOR WILL DISAPPEAR, THEN REAPPEAR.

Under the Rules of the American Dairy Goat Association  
The herein described animal has been accepted for registry in the American Dairy Goat Association under the Bylaws and policies of the Association. This certificate is issued in reliance on the truth of the statements submitted in the application for registry or transfer, but it is not deemed a guarantee by the Association of the breeding or ownership of the animal. If an animal has been admitted through any misrepresentation or fraud, such entries or transfers are void, together with all entries and transfers that may have been made in reliance on any such entries, and the American Dairy Goat Association assumes no liability for damages arising from such entries or transfers. Advertisers in this certificate assume no liability for the ADGA office, under the ADGA rules, under the ADGA rules.

**CERTIFICATE OF TRANSFER**

I have on \_\_\_\_\_  
sold this animal to \_\_\_\_\_ BUYER ID \_\_\_\_\_  
address \_\_\_\_\_  
(CITY) \_\_\_\_\_ (STATE) \_\_\_\_\_ (ZIP CODE) \_\_\_\_\_

OWNER ID \_\_\_\_\_ NAME \_\_\_\_\_ OWNER (SELLER) SIGNATURE \_\_\_\_\_

These names & NIGR CERTIFICATE OF TRANSFER must be completed and signed by seller. CERTIFICATE OF REGISTRY should then be returned promptly to ADGA with appropriate transfer fee, if lower or same as ADGA member. All documents within 30 days of sale to \$5.00 (non-member) 11+ days after sale. If buyer and seller are nonmembers, cost is \$10. Prices subject to change without notice. 20130372682

20140538120  
1444329

# Approved Scales



- ▶ Scales Must Be Calibrated Annually
  - ▶ Scale Calibration Is \$5 Plus Shipment Back
  - ▶ Free Calibration At Indiana State Fair
- ▶ Approved Scales: [http://www.quality-certification.com/approved\\_devices.asp#scales](http://www.quality-certification.com/approved_devices.asp#scales)
- ▶ ISDA Sells Calibrated AWS H110 Scales For \$25 Plus Shipping



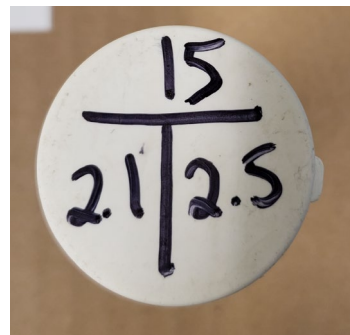
# When to Test?

- ▶ Does must be at least 5 days in milk before testing
  - ▶ Under 5 days the milk has residual colostrum
- ▶ Does must have their first test before 90 days in milk
  - ▶ Under 30 days is strongly recommended
- ▶ Test days must be at least 15 days apart

# Weighing & Sampling Milk



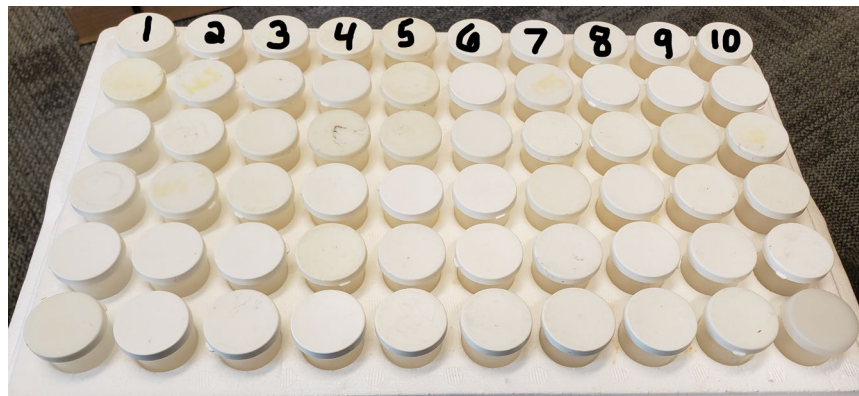
- ▶ Tare Scale To Bucket Or Record Weight Of Bucket
- ▶ Weigh And Record Milk Weights
  - ▶ Easiest Is To Write Weights And Sample Or Index Number On Vial Then Transfer To Paperwork After Milking (Example Below)
- ▶ Agitate Milk Sample By Stirring
- ▶ Fill Vial Halfway with Agitated Milk
  - ▶ Repeat During Second Milking - Keeping The Sample Volume Below Maximum Fill Line



# Agitating and Storing Samples



- ▶ After Sampling, Gently Invert Vial To Mix Preservative
  - ▶ Sample Should Turn Orange In Color
- ▶ Place Samples In Sample Order From Left To Right, Top To Bottom
  - ▶ Top Row Of Samples Will Be 1-10
- ▶ Store Samples In Cool Environment (70° Or Below Is Ideal)



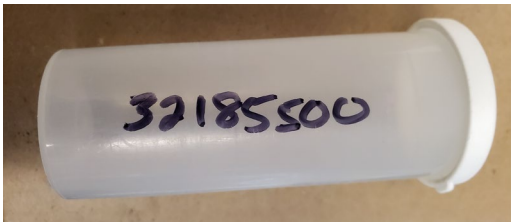
# Sending Test Paperwork

- ▶ What materials do we need?
  - ▶ 201 barn sheet completed with sample numbers listed
  - ▶ Milking Times
- ▶ Send Test Day Papers To ISDA
  - ▶ Email Them To [efarrow@purdue.edu](mailto:efarrow@purdue.edu) Or Mail To ISDA At The Address Below

Indiana State Dairy Association  
270 S Russell Street Rm 1088  
West Lafayette, IN 47907

# Sending Test Day Samples

- ▶ Before Shipping Samples, Write Herdcode On The Side Of First Vial
- ▶ Ship Samples To DHI Coop
  - ▶ If Shipping Via UPS - 1224 Alton-Darby Creek Rd, Columbus, OH 43228
  - ▶ If Shipping Via USPS - P.O. Box 28168, Columbus, OH 43228
  - ▶ Ship With Sample Shipment Report
- ▶ ISDA Offers PrePaid UPS Ground Labels For Herds Under 60 Does For \$10



<b>Indiana State Dairy Association</b>  SAMPLE SHIPMENT REPORT  _____ <small>Technician Name / Technician Number</small>			TRANSPORT		DATES	
			<input type="checkbox"/> USPS <input type="checkbox"/> UPS <input type="checkbox"/> DLS <input type="checkbox"/> FEDEX <input type="checkbox"/> PERSON <input type="checkbox"/> TRUCK	SHIPPED _____  RECEIVED _____		
Herdcode	Owner Name	RACK OR FOAM NUMBERS	Check Enclosed		SUPPLY REQUEST	
<input type="checkbox"/> 1			<input type="checkbox"/> Yes	<input type="checkbox"/> No		
<input type="checkbox"/> 2			<input type="checkbox"/> Yes	<input type="checkbox"/> No		
<input type="checkbox"/> 3			<input type="checkbox"/> Yes	<input type="checkbox"/> No		
<input type="checkbox"/> 4			<input type="checkbox"/> Yes	<input type="checkbox"/> No		
<input type="checkbox"/> 5			<input type="checkbox"/> Yes	<input type="checkbox"/> No		
<input type="checkbox"/> 6			<input type="checkbox"/> Yes	<input type="checkbox"/> No		
<input type="checkbox"/> 7			<input type="checkbox"/> Yes	<input type="checkbox"/> No		
<input type="checkbox"/> 8			<input type="checkbox"/> Yes	<input type="checkbox"/> No		

Total # of Foams/Racks: \_\_\_\_\_  
 Please return / Drop Off: \_\_\_\_\_ Empty Foams/Racks    \_\_\_\_\_ Full Foams/Racks  
 version: 1.0

# Post-Test Date

- ▶ Sample Box Should Come Back From The lab
- ▶ Large Packet From The Processing Center (DRMS) Should Arrive With Your Results And Lactation Records
  - ▶ On First Test Be Sure To Check Registration Numbers And Lactation Number
- ▶ Standard Envelope From ISDA With Invoice, UPS Label, And Additional Reports Should Arrive

# Verification Test

- ▶ Required For Most Test Plans
  - ▶ Between 60 and 150 Days In Milk
- ▶ Must Be Performed By A Supervisor That Is Not The Regular Supervisor
- ▶ Supervisor Must Attend 3 Consecutive Milkings
- ▶ Supervisor Must Verify Identification (Normally Tattoos) On All Animals
- ▶ AGDA's Verification Form Must Be Completed And Mailed To ISDA

# Round Robin

- ▶ Requires At Least Three DHIR Certified Supervisors
  - ▶ A Tests B, B Tests C, C Tests A
- ▶ Verification Tests Require Supervisor Outside Of Circle (For Groups Of 3)
  - ▶ For Groups Larger Than 3, A Supervisor Other Than The Regular Supervisor Can Perform VT
- ▶ Owners Are Eligible For Test Types 20 & 22



# Diagnostic/Additional Testing

- ▶ Tests that can be run with your component sample
  - ▶ Johnes Milk Samples \$6
  - ▶ Pregnancy Milk Samples \$4.5
  - ▶ MUN Tank Sample \$5.00
  - ▶ MUN Individual \$.25
  - ▶ Mastitis Panel - Call Elizabeth For Pricing
- ▶ Additional tests through DHI Cooperative
  - ▶ Blood Pregnancy \$3 - Kits available through DHI Cooperative website
  - ▶ CAE - Call DHI Cooperative for pricing

# Questions?

Elizabeth Straw - Executive Secretary  
270 South Russell St  
West Lafayette, IN 47907  
(765) 494-8025  
Efarrow@purdue.edu