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NORTH CAROLINA - BEEF QUALITY ASSURANCE PROGRAM

BQA Checklist and Contract

I am committed to producing beef cattle which are safe, wholesome, high quality, consistent, and produced in an environmentally-sound manner. To do this, I will strive for the following:

Feedstuffs/Feed Additives

- ✓ A quality feed control program will be maintained for all incoming feed ingredients.
✓ Only FDA-approved medicated feed additives will be used in rations.
✓ Proper withdrawal time for all additives and pesticide/herbicide use will be observed to avoid violative residues.
✓ Ruminant-derived protein sources will not be fed.

Processing/Treatment and Records

- ✓ Extra-label drug use will only be used when prescribed by a veterinarian with a valid veterinarian-client-patient relationship.
✓ Records will be maintained for all treatments (individual or group) following BQA-suggested record keeping guidelines and will be kept for a minimum of three years.

Injectable Animal Health Products

- ✓ All injections will be administered in the neck region only. This includes both subcutaneous and intramuscular injections.
✓ All individual treatments will strictly follow only FDA/USDA/EPA guidelines, and products which cause tissue damage will be avoided.

Care and Husbandry Practices

- ✓ Cattle management will follow animal care and well-being guidelines that conform to good veterinary and husbandry practices to avoid bruising, stress, or injury.
✓ Regularly evaluate and implement biosecurity practices.

By signing below, you understand and accept that the personal information you provide on this enrollment application may be shared with other departments and affiliated organizations of the North Carolina Cattlemen's Association, including, but not necessarily limited to Membership Services. The personal information provided will NOT be shared with any person or entity outside of the North Carolina Cattlemen's Association and its affiliated organizations.

Name: _____ Business Name: _____

Address: _____ City: _____ ST: ___ Zip: _____

Email: _____ Phone: _____ Fax: _____

Signature: _____ Date: _____

Circle all that apply to your business: Feedlot Cow/Calf Seedstock Stocker Other

Employees please list employer's name and address:

NC-BQA Certified Trainer Signature: _____ Trainer BQA #: _____

Check # _____ Cash _____ BQA Certification # _____ Date Processed: _____

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