

Date: 11/18/2016

To: Angora Breeders

Texas A&M Agrilife will be conducting an Angora goat test at the Sonora Station for billy kids born in 2016. The purpose of this program is to aid in the selection of goats that can thrive in a range environment and produce high value fleeces. The test will be conducted on pasture so that performance is measured in an environment where fitness is important. We plan to feed 3 lbs feed/hd/week. This may be adjusted if pasture conditions change.

We have changed the schedule for the test to have a longer period of time for evaluating fleece growth and to have a longer stapled fleece at the end of the test.

Proposed test schedule:

Delivery:	December 7, 2016	(Weigh at Delivery)
Initial Shearing:	February 21	
Weigh:	May 2	70 days from February 21
Weigh:	July 18	77 days from May 2, 147 days total
Final Shearing:	July 18	

Fees: A deposit of \$100/billy will be collected at delivery. If expenses are more than expected, breeders will be required to contribute more. If expenses are less than expected a refund will be paid to the breeders. The \$100/hd deposit includes fees for shearing twice, fiber analysis on a fleece core sample, pasture use, labor, feed, ear tags and miscellaneous supplies.

Bucks will be observed much less frequently than a feedlot test. Texas AgriLife and its staff assume no liability for death losses or injuries, or associated veterinary costs.

All animals should be inspected at home. Do not bring bucks that have evidence of Caseous Lymphadenitis or any other health problems.

Sincerely,



Dan Waldron  
Professor  
Texas A&M AgriLife Research



Reid Redden  
Associate Professor  
Texas A&M AgriLife Extension

## 2016-2017 ANGORA GOAT PERFORMANCE TEST ENTRY FORM

TO: Texas A&M AgriLife Research  
 Box 918,  
 Sonora, TX 76950

Date: \_\_\_\_\_

I hereby make application for entry of \_\_\_\_\_ bucks in the Angora Goat Performance Test beginning in December 2016. Enclosed is a deposit of \$100.00 per animal, totaling \$ \_\_\_\_\_.

I agree to the terms specified in the attached letter.

Reg/Com	Flock No.	Date of Birth	Type of Birth (S, TW, TR)	SIRE Information	Date Shorn

Signed: \_\_\_\_\_ Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_