



REGISTRATION FOR POULTRY TESTING AGENT TRAINING
 NORTH DAKOTA DEPARTMENT OF AGRICULTURE ANIMAL HEALTH DIVISION
 STATE BOARD OF ANIMAL HEALTH
 SFN 62461 (3-2025)

Name		Telephone Number	
Address	City	State	ZIP Code
County	Email Address		

In an effort to better serve bird owners and testing agents, we have a contact list of certified testing agent's available to bird owners on our public website. This list would not include testing agent's addresses, **only first and last name, phone number, county and/or town and optional email address for those that provide your consent will be published.** Our office staff will remove your information upon your request at any time.

I consent to have my contact information listed on the public website	<input type="checkbox"/> Yes	<input type="checkbox"/> No
I consent to have my email address listed on the public website	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Owner Signature	Date
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Please understand that having your contact information available to the public does not obligate you to test someone's birds should you choose not to. The arrangement that you make with the poultry owners in terms of scheduling and the fees that you may charge are independent from the ND State Board of Animal Health. The sole purpose for posting your information is to provide the information necessary to network with poultry owners.

<input type="checkbox"/> First-time Training <input type="checkbox"/> Refresher Lunch will be provided. Indicate if you will stay for lunch. <input type="checkbox"/> Yes <input type="checkbox"/> No

For Office Use Only

Date	Check Number	Operating	Amount
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