

Producer Registration Form

Please complete the entire form and mail to: Ontario Pork, 655 Southgate Drive, Guelph, ON. N1G 5G6 Attention: Member Services or fax: 519-829-1769 or scan/email: memberservices@ontariopork.on.ca

Producer Contact:				
Last Name		First		Middle
Company/Farm Name	e			
Phone		Cell		Fax
Email Address				
Secondary Contact:				
Last Name		First		Middle
Phone		Cell		Fax
Email Address				
Contact Type: 1	Family	Barn manager	Other:	
Producer Mailing A	ddress:			
911		Street		RR#
PO Box	Stn	City		Prov
Postal Code				
Premises Informatio	n:			
			First	
_	and Owner Last Name		Barn Phone	
	Email Address			
	Street			
	Lot			•
County/District		Township/M	Iunicipality	
Farm Premises ID (PI		_		
		nt for Ontario Pork		n my behalf.
				en-CA or at 1-888-247-4999.

Premises Legal Land	Owner Mailing Address:	Same as Producer	r's Mailing Address	
911St			RR#	
PO Box	_StnCity		_ Prov	
Postal Code				
Operation Type: (Ple	ase check all that apply)			
Farrow to Finish	Farrow to Wea	an Nursery	Finisher	
Breeder/Multiplie	er GAP	Organic	Humane	
Raised without A	ntibiotics	Other:		
Barn Capacity:				
Sow #	Gilt #	Weaner #		
Finisher #	Boar #			
	out to Ontario Pork reque	nic to share this info is:sting specialty pork product		
Are your pigs a heritag	e breed?		Yes No	
If yes, what ty	pe of heritage breed:		_	
Do your pigs have acco	Yes No			
Do you conduct on far	Yes No			
If yes, do you wan	t to learn more about Onta	rio Pork's retail program?	Yes No	
Other Livestock on th	ne Farm: (Please check ala	l that apply)		
Dairy Beef	Poultry Hor	se Sheep Goat	Other:	
Tattoo Information:				
	numbers are required for the	his premises:		
·	•			
Producer Signature:		Date	and with the Develop	
		fyour personal information in complia r a copy of our privacy statement, visit		

1-877-668-7675.