

Pronghorn Measurement Form : Age Class____ **Sex**____ **Gen. Condition**____

Collector_____ **ID #** _____ **State**____ **County or GMU**_____

Length_____ **Hind Foot L.** _____ **Tail L.** _____ **Left Ear L.** _____
(nose tip to base of tail) (hoof tip to hock) (base of tail to tip of last vertebrae) (notch to tip)

Shoulder Height_____ **Chest Girth** _____ **Weight** (whole) _____
Or dressed (entrails removed) _____
Or carcass (head, hide and entrails removed)_____

Longest Horn Length_____ **Horn Base** _____ **Gross B&C Score**_____

(Reverse side of envelope)

Pronghorn Tooth Collection Form

Arizona Antelope Foundation

Species____ Sex____ Gross Score____

P.O. Box 12590

State _____ GMU or County_____

Glendale, AZ 85318-2590

Date_____ Collector ID Code_____

Hunter Name and Contact Info_____
