

# THE AMERICAN AND DELAINE MERINO RECORD ASSOCIATION WORK ORDER AND FEE SCHEDULE

Phone: 785-456-8500 • PO Box 231, 305 Lincoln - Wamego, KS 66547 • Fax: 785-456-8599 • Email: asregistry@gmail.com

Name \_\_\_\_\_ Membership # \_\_\_\_\_

Address \_\_\_\_\_ Website \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ E-mail \_\_\_\_\_

Check one of the following:

Senior Member  
*(age 18 or older)*

Junior Member  
*(under age 18)*

New Member Applying

	Quantity	Member Price	Total Cost
<b>A. MEMBERSHIPS</b>			
1. Lifetime Membership Fee <i>(one-time fee for New Members)</i> _____		15.00	
2. New Senior Member _____		20.00	
3. Annual Senior Dues _____		20.00	
4. New Junior Member _____		Free	
5. Junior Dues <i>(date of birth ____ / ____ / ____)</i> _____		Free	
<b>B. REGISTRATIONS</b>			
1. Lambs up to one year of age _____		6.00	
2. Sheep older than one year of age _____		10.00	
3. From Another Merino Assn. _____		6.00	
4. Rush Registration <i>(per animal - includes registration fee)</i> _____		12.00	
<b>C. TRANSFERS</b>			
1. If Recorded within 60 days of sale _____		4.00	
2. If Recorded after 60 days of sale _____		8.00	
3. Rush Transfer <i>(per animal - includes transfer fee)</i> _____		12.00	
<b>D. DUPLICATE CERTIFICATE</b> _____		4.00	
<b>E. CHRISTENING/NAMING FEE</b> _____		25.00	
<b>F. EMERGENCY FAXES</b> <i>(per page - not including cover)</i> _____		3.00	
<b>G. SPECIAL HANDLING</b>			
1. UPS Overnight Delivery _____		24.00	
2. Postal Overnight, USPS <i>(two-three day delivery)</i> _____		7.00	
3. Priority Mail, USPS <i>(four-five day delivery)</i> _____		7.00	
<b>H. OTHER FEES</b> _____			
<b>I. ADMRA RAM HEAD PINS</b> <i>(Available through ADMRA Secretary)</i> _____		3.00	

*Call to order...  
Must provide credit card number  
for direct payment to UPS*

Amy Schroeder, ADMRA Secretary  
7744 State Rt 613 - McComb, Ohio 45858  
alschroeder@frontier.com

**TOTAL FEES FROM ABOVE** ..... \$ \_\_\_\_\_

**Previous Balance Due** *(please return invoice)* ..... \$ \_\_\_\_\_

**Previous Credit Due** *(please return invoice)* ..... \$ \_\_\_\_\_

**TOTAL AMOUNT DUE** ..... \$ \_\_\_\_\_

**PAYMENT BY CHECK #** \_\_\_\_\_ **OR CREDIT CARD #** \_\_\_\_\_

**EXPIRATION DATE ON CARD** \_\_\_\_\_ **THREE DIGIT CODE ON BACK OF CARD** \_\_\_\_\_

**ZIP CODE OF BILLING ADDRESS** \_\_\_\_\_ **SIGNATURE OF CARDHOLDER** \_\_\_\_\_

*All credit card transactions will be charged a 15 cent transaction fee and a 3.5% convenience fee on the total amount.*

**• ALL WORK requested MUST HAVE accompanying PAYMENT TO PROCESS •**

## Breeding Certificate

This is to certify that Ram \_\_\_\_\_ Registration # \_\_\_\_\_  
*(Ram Name & Tag Number)* *(Registration Number)*  
were exposed to Ewes \_\_\_\_\_  
*(List Ewe Names, Tag Numbers & Association Numbers)*  
from \_\_\_\_\_ to \_\_\_\_\_.  
*(Month, Day, Year)* *(Month, Day, Year)*  
Owner of ewes at time of Mating: \_\_\_\_\_ Owner of ram at time of Mating: \_\_\_\_\_  
*(Signature)* *(Signature)*  
Address: \_\_\_\_\_ Address: \_\_\_\_\_

## Breeding Certificate

This is to certify that Ram \_\_\_\_\_ Registration # \_\_\_\_\_  
*(Ram Name & Tag Number)* *(Registration Number)*  
were exposed to Ewes \_\_\_\_\_  
*(List Ewe Names, Tag Numbers & Association Numbers)*  
from \_\_\_\_\_ to \_\_\_\_\_.  
*(Month, Day, Year)* *(Month, Day, Year)*  
Owner of ewes at time of Mating: \_\_\_\_\_ Owner of ram at time of Mating: \_\_\_\_\_  
*(Signature)* *(Signature)*  
Address: \_\_\_\_\_ Address: \_\_\_\_\_

## Artificial Insemination Certificate

This is to certify that Ewes \_\_\_\_\_  
*(List Ewe Names, Tag Numbers & Association Numbers)*  
were AI'd with \_\_\_\_\_ units/straws of semen from Ram \_\_\_\_\_ Registration # \_\_\_\_\_  
*(# used)* *(Ram Name & Tag Number)* *(Registration #)*  
Technician Print Name: \_\_\_\_\_ Date of Service: \_\_\_\_\_  
Technician Signature: \_\_\_\_\_ Technician Contact Number: \_\_\_\_\_  
Owner of ewes at time of Mating: \_\_\_\_\_ Owner of ram / semen at time of Mating: \_\_\_\_\_  
*(Signature)* *(Circle one)* *(Signature)*  
Address: \_\_\_\_\_ Address: \_\_\_\_\_

## Embryo Transfer Certificate

This is to certify that Ewe \_\_\_\_\_ Registration # \_\_\_\_\_  
*(Donor Ewe's Name & Tag Number)* *(Ewe's Registration Number)*  
was flushed and \_\_\_\_\_ eggs were recovered on \_\_\_\_\_ bred to Ram \_\_\_\_\_  
*(# eggs)* *(Month, Day, Year)* *(Ram Name & Tag Number)*  
Registration # \_\_\_\_\_ eggs were implanted into recipient ewes on \_\_\_\_\_  
*(Ram's Registration Number)* *(# eggs)* *(Month, Day, Year)*  
Technician Print Name: \_\_\_\_\_ Date of Service: \_\_\_\_\_  
Technician Signature: \_\_\_\_\_ Technician Contact Number: \_\_\_\_\_  
Owner of ewes at time of Mating: \_\_\_\_\_ Owner of ram / semen at time of Mating: \_\_\_\_\_  
*(Signature)* *(Circle one)* *(Signature)*  
Address: \_\_\_\_\_ Address: \_\_\_\_\_