1

BRED BY:

Address:

ST./RT./Box

(Owner of Dam at Time of Mating)

FINNSHEEP BREEDERS ASSOCIATION REGISTRATION APPLICATION

Crossbred EWE

Phone: 785-456-8500 • PO Box 231, 305 Lincoln - Wamego, KS 66547 • Fax: 785-456-8599

Directions: Complete steps 1-23 and mail to the above address. Payment must accompany form.

Detailed instructions are available online at www.finnsheep.org

OWNED BY:

ST./RT./Box

Address:

Sr. Member #_		Curv					ST	7				Curv					CT	Zip
r. Member #																		
Non-Member #	:	PHONE				Ем	AIL					PHONE			E	MAIL		
			*Co	olor: \	W=W	hite; BL=l	Black; BR=Brow	n; G	=Gra	y; F=	Fawn	**Marking: P	ie=Pi	ebald;	Bgr=	Badg	ger; HST=Head	l, Socks & Tail
ANIMAL T	O BE REGISTER					SIRE					DAM						TRANSFE	
Leave Blank	Nome of Animal	4	5	6	7	8 FBA	9 Nama	10	11	12	13	14 Name	15	16	1,7	18	19	20 If Sold, To Whom & Address
For Office Use Only	Name of Animal Private Flock Tag	Birthdate	Size	Color	Marking	FBA Reg Number	Name Private Flock Tag	Size	Color	Marking	FBA Reg Number	Private Flock Tag	Size	Age at Lambing in Months	Color	Marking	Date Sold	If Sold, To Whom & Address (Enclose Transfer Fee)
Sauple	tluber 09-26	2-27-87	2	BL	Pie	82445	Wilson 50	2	G	Bgr	82445	Wilson 50	2	22	BR	Pie		
	•																	

ATTENTION

- Please sign as Dam or Sire Owner or Both
 - Please Check Work for Accuracy.
- After Completion, Please Keep a Copy of this Form in Your File

Payment Must Accompany Registration

Refer to Fee Schedule for all Fees

21 SIGNATURE OF OWNER OF DAM (time of lambing)	Date
22 SIGNATURE OF OWNER OF RAM (time of mating)	Date

Applications completed by partnership must also bear signature of a person authorized to sign for account.

(Owner of Dam at Time of Birth)

Signature above represents:

"The information here is correct to the best of my knowledge and belief"