1 Bred By:

ADDRESS:

St./Rt./Box

(Owner of Dam at Time of Mating)

FINNSHEEP BREEDERS ASSOCIATION REGISTRATION APPLICATION

Purebred EWE

Phone: 785-456-8500 • PO Box 231, 420A 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:

Address:

ST./RT./Box

(Owner of Dam at Time of Birth)

Sr. Member #		~					a m		_				~					C.F.	
r. Member #		CITY					ST_		_ZIF				City						_Zip
Non-Member #		PHONE_				Ем	AIL						Phone			E	MAIL		
			*Co	lor: V	V=W	hite; BL=I	Black; BR=	=Brow	n; G	=Gra	y; F=	=Fawn	**Marking: P	ie=Piel	bald; l	Bgr=	Badg	er; HST=Head	d, Socks & Tail
ANIMAL TO	ED				SIRE			DAM									TRANSFER		
Leave Blank For Office Use Only	3 Name of Animal Private Flock Tag	4 Birthdate	5 Litter Size	6 * Color	7 ** Marking	8 FBA Reg Number	9 Name Private Floo	k Tag	10 Litter Size	11 * Color	12 ** Marking	13 FBA Reg Number	14 Name Private Flock Tag	Litter Lin	ambing	Color	18 ** Marking	19 Date Sold	20 If Sold, To Whom & Address (Enclose Transfer Fee)
Sample	Huber 09-26					82445		50	2	G	Bar	82445		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.

Signature above represents:

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