1 Bred By:

ADDRESS:

St./Rt./Box

(Owner of Dam at Time of Mating)

FINNSHEEP BREEDERS ASSOCIATION REGISTRATION APPLICATION

Purebred RAM

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 #	~	_				~												
r. Member #	CITY					ST	_ZII				City						_Zip	
Non-Member #	PHONE_				Ем	AIL					Phone			E	MAII	·		
		*Co	lor: `	W=W	/hite; BL=I	Black; BR=Brow	n; G	=Gra	y; F=	Fawn	**Marking: I	Pie=P	iebald;	Bgr=	Badg	er; HST=Head	l, Socks & Tail	
ANIMAL TO BE REGISTERI					SIRE			DAM						TRANSI				
Leave Blank For Office Use Only 3 Name of Animal Private Flock Tag	4 Birthdate	5 Litter Size	6 * Color	7 ** Marking	FBA Reg Number	9 Name Private Flock Tag	10 Litter Size	11 * Color	12 ** Marking	FBA Reg Number	14 Name Private Flock Tag	15 Litter Size	16 Age at Lambing in Months	17 * Color	18 ** Marking	19 Date Sold	20 If Sold, To Whom & Address (Enclose Transfer Fee)	
Sample Huber 09-26					82445		_			82445		2			Pie			
									-0									
												M						

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)

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"