

# GOTLAND SHEEP BREEDERS ASSOCIATION OF NORTH AMERICA

## WORK ORDER AND FEE SCHEDULE

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

A.  New Member  Renewal

B.  Check Enclosed

	Quantity	Member Price		Total Cost
<b>A. MEMBERSHIPS</b>				
1. Junior (no voting privileges) (date of birth ____/____/____)		5.00		
2. Active (one vote per farm)		15.00		
3. Associate (no voting privileges)		10.00		
<b>B. EWE/RAM REGISTRATIONS</b>				
		8.00		
<b>C. EWE/RAM RECORDING</b>				
		5.00		
<b>D. TRANSFER OF OWNERSHIP</b>				
		5.00		
<b>E. FOUNDATION SHEEP</b>				
		5.00		
<b>F. DUPLICATE CERTIFICATE</b>				
		5.00		
<b>G. CHANGES TO ANIMAL</b>				
1. Reprint with Name or Ear Tag # Changed		5.00		
2. Change Name or Ear Tag #		5.00		
<i>(In accordance with general rules #7 &amp; #8 on the GSBANA Instruction Sheet)</i>				
<b>H. IMPORTED AI RAMS &amp; IMPORTED ET SHEEP</b>				
		15.00		
<b>I. DUAL REGISTERED SHEEP</b>				
		15.00		
<i>(AGSS registered without parents in the GSBANA database)</i>				
<b>J. RUSH FEE (per each registration &amp; transfer)</b>				
		5.00		
<b>K. EMERGENCY FAXES (per page - not including cover)</b>				
		3.00	same	

Please send Memberships to:  
 GSBANA Treasurer  
 Carol Ronan  
 4001 Deer Creek Road  
 Selma, OR 97538

<b>L. SPECIAL HANDLING</b>		<i>Call to order..</i>
1. UPS Overnight Delivery _____		<i>Must provide credit card number for direct payment to UPS</i> _____ same _____
2. Postal Overnight, USPS (two-three day delivery) _____	26.00	same
3. Priority Mail, USPS (four-five day delivery) _____	8.00	same

**M. OTHER FEES** \_\_\_\_\_

**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 •**



# Gotland Sheep Breeders Association of North America

## Certificate of Service

Owner of ewe(s): \_\_\_\_\_ Farm name: \_\_\_\_\_ Farm prefix: \_\_\_\_\_ Flock# \_\_\_\_\_  
 Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

**(Use multiple forms as needed. If ewe or ram GSBANA# is pending, note such on this form)**

Ewe's Name	Ewe's Tag#	Ewe's GSBANA #	AI, ET or Natural	Ram's Name	Ram's GSBANA#	Date exposure/loan began	Date exposure/loan ended

This information is to certify that the offspring of the above ewes will be recordable/registerable in GSBANA if they meet the breed standards as outlined in the bylaws and upgrading rules.

- I leased these ewes to: \_\_\_\_\_
- I sold these bred ewes to: \_\_\_\_\_
- I am the owner of the ram and leased/loaned him to the above owner of the ewes.

My name: \_\_\_\_\_ Address: \_\_\_\_\_ City/State/Zip: \_\_\_\_\_

Farm Name: \_\_\_\_\_ Farm Prefix: \_\_\_\_\_

Signature, owner of ram: \_\_\_\_\_ Date: \_\_\_\_\_

Signature, owner of ewe(s): \_\_\_\_\_ Date: \_\_\_\_\_