

- Important
 1. Type or Print Legibly
 2. Lambs are mature after 12 months
 3. Proper fees must accompany all work

AMERICAN ILE-DE-FRANCE SHEEP ASSOCIATION REGISTRATION APPLICATION

Phone: 785-456-8500 • PO Box 231, 420A Lincoln - Wamego, KS 66547 • Fax: 785-456-8599 Email: asregistry@gmail.com

BREEDER
 (Owner of Dam at Time of Mating) _____

ADDRESS
 ST. OR RT. _____ CITY _____ ST _____ ZIP _____

OWNER
 (Owner of Dam at Time of Birth) _____

ADDRESS
 ST. OR RT. _____ CITY _____ ST _____ ZIP _____

Member # _____

Non-Member # _____

Leave Blank For Office Use Only	1 Sex	2 Flock Prefix & Private Flock Tag or Tattoo Number	3 Birth Type Sg, Tw, Tr	4 Breeding Type	5 Birthdate	6- Sire		7- Dam		8 - Transfer
						Registration Number	Name Private Flock Tag	Registration Number	Name Private Flock Tag	
Sample	E	Prefix 001	Sg	Nat	04-12-23	123456	Wilson 50	78901	Huber 85-23	

ATTENTION

- Owner of Dam at time of lambing must sign this application.
- Please Check Work for Accuracy.
- After Completion, Please Keep a Copy of this Form in Your File

DATE _____
 DAYTIME PHONE _____
 EVENING PHONE _____
 FAX NUMBER _____
 E-MAIL _____

SIGNATURE OF OWNER OF DAM (time of lambing) _____
 SIGNATURE OF OWNER OF RAM (time of mating) _____
 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"*