## Important 1. Type or Print Legibly

CORMO BREEDERS COALITION, INC.

DECICED ATIC	N APPLICATION
REGISTRATIC	N APPLICATION

2.	Lambs	are mature after 12 months
3.	Proper	fees must accompany all wor

3. Proper fees must accompany all work	Filolie: /63-430-6300 • FO Box 231, 42	20A Lincoln - Walliego, KS 00347 • Fax.	/03-430-0399 • Elliali. asi	egisti yazginan.
	Breeder			
	(Owner of Dam at Time of Mating)			
Sr.Member#	Address St. or Rt.	Сіту	ST Zip	
Jr. Member #	Owner (Owner of Dam at Time of Birth)			
	Apppeag			

Address St. or Rt. City ST Zip\_ Non-Member #

Leave Blank	1	d/ ed	2 Flook Profix &	3 Digth	4 Prooding	5	6	- Sire	7 - Dam		8 - Transfer	
For Office Use Only	Sex	Polled/ Horned	<b>2</b> Flock Prefix & Private Flock Tag or Tattoo Number	Type Sg,Tw,Tr	4 Breeding Type Nat, AI, ET	Birthdate	Registration Number	Name Private Flock Tag	Registration Number	Name Private Flock Tag	Date of Sale	8 - Transfer If sold, To Whom & Address (enclose transfer fee)
Sample	E	Н	Huber 87-26	TW	Nat	2-27-02	23598	Wilson 50	19987	Huber 85-23		 
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## **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"