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Non-Member #	

NATIONAL LINCOLN SHEEP BREEDERS' ASSOCIATION **REGISTRATION APPLICATION**

Filone: /83-430-8300	ro box 251, 420A Lincoln - Wallego, KS 00	34/ Fax. 783-	430-8399
BREEDER (Owner of Dam at Time of Mating)			
Address St. or Rt.	Сіту_	ST	Zip_
OWNER (Owner of Dam at Time of Birth)			_
ADDRESS St. or Rt.	Сіту	ST	Zip



Leave Blank	1	2	1 Nome of Animal	2 Disth	3 Dragading	4		5 - Sire		6 - Dam		7 - Transfer
For Office Use Only	Color	Sex	1 Name of Animal Private Flock Tag or Tattoo Number	Birth Type Sg,Tw,Tr	Breeding Type Nat, AI, ET	Birthdate	Registration Number	Name Private Flock Tag	Registration Number	Name Private Flock Tag	Date of Sale	7 - Transfer If sold, To Whom & Address (enclose transfer fee)
Sample	C	E	Huber 09-26	TW	Nat	2-27-14		Wilson 50		Huber 85-23		
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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

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"