



FINNSHEEP BREEDERS ASSOCIATION REGISTRATION APPLICATION

Phone: 785-456-8500 • PO Box 231, 420A Lincoln - Wamego, KS 66547 • Fax: 785-456-8599

Crossbred EWE

Directions: Complete steps 1-23 and mail to the above address. Payment must accompany form.
Detailed instructions are available online at www.finnsheep.org

1 BRED BY: _____
(Owner of Dam at Time of Mating)

ADDRESS: _____
ST./RT./BOX _____

CITY _____ ST _____ ZIP _____

PHONE _____ EMAIL _____

2 OWNED BY: _____
(Owner of Dam at Time of Birth)

ADDRESS: _____
ST./RT./BOX _____

CITY _____ ST _____ ZIP _____

PHONE _____ EMAIL _____

Sr. Member # _____

Jr. Member # _____

Non-Member # _____

*Color: W=White; BL=Black; BR=Brown; G=Gray; F=Fawn

**Marking: Pie=Piebald; Bgr=Badger; HST=Head, Socks & Tail

ANIMAL TO BE REGISTERED				SIRE				DAM				TRANSFER						
3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	
Leave Blank For Office Use Only	Name of Animal Private Flock Tag	Birthdate	Litter Size	* Color	** Marking	FBA Reg Number	Name Private Flock Tag	Litter Size	* Color	** Marking	FBA Reg Number	Name Private Flock Tag	Litter Size	Age at Lambing in Months	* Color	** Marking	Date Sold	If Sold, To Whom & Address (Enclose Transfer Fee)
Sample	Huber 09-26	2-27-14	2	BL	Pie	82445	Wilson 50	2	G	Bgr	82445	Wilson 50	2	22	BR	Pie	-----	-----

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

23 Payment Must Accompany Registration
Refer to Fee Schedule for all Fees

21 SIGNATURE OF OWNER OF DAM *(time of lambing)* _____ Date _____
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”