



COTSWOLD BREEDERS ASSOCIATION WORK ORDER AND FEE SCHEDULE

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

Name _____ Membership # _____

Address _____ City _____ State _____ Zip _____

Email _____ Website _____

Daytime Phone # _____ Alternate Phone # _____ Date _____
Between 8-5

Check one of the following:

Regular Associate Junior

| | Quantity | Member Price | Non-Member Price | Total Cost |
|---|----------|------------------|------------------|------------|
| A. MEMBERSHIPS | | | | |
| 1. Regular Dues _____ | | 20.00 | XX | |
| 2. Associate Dues _____ | | 10.00 | XX | |
| 3. Junior Member (date of birth ____/____/____) _____ | | 5.00 | XX | |
| B. REGISTRATIONS | | | | |
| 1. Animal under 1 year of age _____ | | 5.00 | 20.00 | |
| 2. Animal over 1 year _____ | | 10.00 | 20.00 | |
| 3. Entire flock (if less than registering individual animals) _____ | | 50.00 | XX | |
| C. TRANSFERS | | | | |
| 1. Individual animal _____ | | 5.00 | 20.00 | |
| D. EXTENDED PEDIGREE _____ | | 10.00 | XX | |
| E. REPLACEMENT CERTIFICATE _____ | | 5.00 | XX | |
| E. CORRECTIONS _____ | | 10.00 | XX | |
| F. RUSH FEE (per each registration & transfer) _____ | | 5.00 | XX | |
| H. EXPEDITED POSTAGE IF DESIRED | | | | |
| 1. UPS Overnight Delivery _____ | | Call for pricing | | |
| 2. Postal Overnight, USPS (two-three day delivery) _____ | | 26.00 | | |
| 3. Priority Mail, USPS (four-five day delivery) _____ | | 10.00 | | |
| J. 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** •

Link to Website: _____

- Products Offered:
- | | | |
|---|---|--|
| <input type="checkbox"/> White Cotswold Sheep | <input type="checkbox"/> Yarn | <input type="checkbox"/> Doll Hair |
| <input type="checkbox"/> Black Cotswold Sheep | <input type="checkbox"/> Batts | <input type="checkbox"/> Curls |
| <input type="checkbox"/> Show Stock | <input type="checkbox"/> Pelts | <input type="checkbox"/> Blankets |
| <input type="checkbox"/> Breeding Stock | <input type="checkbox"/> Crocheted/Knitted Products | <input type="checkbox"/> Soap |
| <input type="checkbox"/> Fleece Wethers | <input type="checkbox"/> Wool Processing | <input type="checkbox"/> Other Products (Describe) |
| <input type="checkbox"/> Locker Lambs | <input type="checkbox"/> Spinning/Weaving Services | |
| <input type="checkbox"/> Fleeces | <input type="checkbox"/> Felting Services | |
| <input type="checkbox"/> Roving | <input type="checkbox"/> Wool Oriented Crafts | |

Breeding Certificate

This is to certify that Ram _____ CBA Registration # _____
(Ram Name & Tag Number) *(Registration Number)*

were exposed to Ewes _____
(List Ewe Names, Tag Numbers & Association Numbers)

from _____ to _____
(Month, Day, Year) *(Month, Day, Year)*

Owner of ewes at time of Mating: _____ Owner of ram at time of Mating: _____
(Signature) *(Signature)*

Address: _____ Address: _____

Breeding Certificate

This is to certify that Ram _____ CBA Registration # _____
(Ram Name & Tag Number) *(Registration Number)*

were exposed to Ewes _____
(List Ewe Names, Tag Numbers & Association Numbers)

from _____ to _____
(Month, Day, Year) *(Month, Day, Year)*

Owner of ewes at time of Mating: _____ Owner of ram at time of Mating: _____
(Signature) *(Signature)*

Address: _____ Address: _____