	FINNSHEEP BREEDERS ASSOCIATION REGISTRATION APPLICATION Phone: 785-456-8500 • PO Box 27 • Sedalia, MO 65302 • Email: asregistry@gmail.com Directions: Complete steps 1-23 and mail to the above address. Payment must accompany form. Detailed instructions are available online at www.finnsheep.org												
4 white the	1 BRED BY: (Owner of Dam at Time of Mating) ADDRESS: ST./RT./BOX								2 Owned By: (Owner of Dam at Time of Birth) Address: ST./RT./Box				
Sr. Member #	Сіту					ST	Zip	CITY			ST	Zip	
Jr. Member #		PHONE EMAIL									Emaii		
Non-Member #	<u></u>							rown; G=Gray; F=Fawn		ting: Pie=Piebald; E			
ANIMAL	LS TO BE REGIS	-							DAM TRANSFER				
Leave Blank For Office Use Only	3 Name of Animal Private Flock Tag	4 Birthdate	5 Litter Size	6 Color	7 Marking	8 Spotting	9 FBA Reg Number	10 Name of Animal Private Flock Tag	11 FBA Reg Number	12 Name of Animal Private Flock Tag	13 Months Lambing Age	14 Date Sold, If Sold	15 To Whom & Address (Enclose Transfer Fee)
SAMPLE	HUBER 09-26	2-27-14	2	BL	S	PIE	82445	WILSON 50	82446	WILSON 51	22		
	ENTION	18					16 SIGN/	ATURE OF OWNER OF DAM	(time of lamb	ing)			Date
• Please sign Owne							ATURE OF OWNER OF DAM					Date	
	Check Work Accuracy.	Refer t	o Fe	e Sc	ched	ule					ar signatı	ure of a person	authorized to sign for account.

• After Completion, Please Keep a Copy of this Form in Your File

for all Fees

Signature above represents: "The information here is correct to the best of my knowledge and belief"