

# NATIONAL TUNIS SHEEP REGISTRY, INC WORK ORDER AND FEE SCHEDULE

Phone: 785-456-8500 • PO Box 27 • Sedalia, MO 65302 • Email: asregistry@gmail.com



Name \_\_\_\_\_

Membership # \_\_\_\_\_

Address \_\_\_\_\_ Website \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ E-mail \_\_\_\_\_

Check one of the following:

- Senior Member    
  Junior Member (until age 22)    
  Non-Member    
  New Member Applying

	Quantity	Member Price	Non-Member Price	Total Cost
<b>A. MEMBERSHIPS</b>				
1. New Senior Member _____		25.00	xxx	
2. New Junior Member (date of birth ____/____/____) _____		12.00	xxx	
3. Annual Senior Dues _____		25.00	xxx	
4. Annual Junior Dues (date of birth ____/____/____) _____		12.00	xxx	
<b>B. REGISTRATIONS</b> _____		7.00	14.00	
<b>C. TRANSFERS</b> _____		7.00	10.00	
<b>D. EXTENDED PEDIGREE</b> (if not already provided on paper)				
1. Four Generation _____		30.00	60.00	
2. Five Generation _____		60.00	90.00	

**D. CHRISTENING FEE** (must pay to name any animal) \_\_\_\_\_ 25.00     xxx  
 (Already registered animal can be named by returning the registration paper with fee, at that time the name will be added and a new paper will be provided)  
 (New registrations, include christened name on registration application and it will be included on paper) \_\_\_\_\_

<b>E. DUPLICATE CERTIFICATE</b> _____		6.00	10.00	
<b>F. RUSH FEE</b> (per each registration & transfer) _____		5.00	30.00	
<b>G. EMERGENCY FAXES/EMAILING DOCUMENTS</b> (per page) _____		3.00	same	
<b>H. SPECIAL HANDLING</b>				
1. UPS Overnight Delivery _____		Call to order... Must provide credit card number for direct payment to UPS		
2. Postal Overnight, USPS (two-three day delivery) _____		33.00	same	
3. Priority Mail, USPS (four-five day delivery) _____		11.00	same	

**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 •