BABYDOLL SOUTHDOWN SHEEP BREEDERS ASSOCIATION
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:

Adult Member ☐   Junior Member ☐   New Member Applying ☐   Lifetime Dues ☐
                                      (until age 21)

	Quantity	Member Price	Total Cost
A. MEMBERSHIPS			
1. New Adult Member _____		16.50	
2. Annual Adult Dues		16.50	
3. New Junior Member *(date of birth ____/____/____)*		11.50	
4. Junior Dues *(date of birth ____/____/____)*		11.50	
5. Lifetime Membership		300.00	
B. REGISTRATIONS			
1. Animals under 1 year of age		6.50	
2. Animals over 1 year of age		9.50	
3. Input of Pedigree (up to 5 generations)		5.50	
C. RECORDATION			
1. Animals under 1 year of age		6.50	
2. Animals over 1 year of age		9.50	
3. Input of Pedigree (up to 5 generations)		5.50	
D. TRANSFERS			
1. All transfers		6.50	
E. DUPLICATE CERTIFICATE		6.50	
F. RUSH FEE *(per each registration & transfer)*		10.00	
G. EMERGENCY FAXES *(per page - not including cover)*		4.50	
H. SPECIAL HANDLING			
1. UPS Overnight Delivery		*Call to Order*	
2. Postal Overnight, USPS *(two-three day delivery)*		33.00	
3. Priority Mail, USPS *(four-five day delivery)*		11.00	

I. 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 #** _____

Breeding Certificate

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

was 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 _____ BSSBA Registration # _____
(Ram Name & Tag Number)   *(Registration Number)*

was 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:_____