

**AwUSA**

Australian/American White Sheep USA

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:

Member New Member Applying

A. MEMBERSHIPS

Quantity	Total Cost
1. Membership --Dues paid by January 31st	45.00
2. Membership --Dues paid after January 31st	65.00

B. REGISTRATIONS/ RECORDATION

For 100% Australian White ewe & rams, F1 - F4 Am White ewes & F5 Am White rams
 (No animals can be registered/recorded via AI/Embryo Transplant without
 Semen Sale Form or Embryo Flush from on file.)

1. 2 Years old and Younger	8.00
2. Older than 2 Years Old	16.00
3. Add Animal Name to Registration Certificate	20.00

C. TRANSFERS

1. Ewes under 60 days (from date of sale)	8.00
2. Ewes over 60 days (from date of sale)	16.00
3. Rams under 60 days (from date of sale)	8.00
4. Rams over 60 days (from date of sale)	16.00

D. DUPLICATE CERTIFICATE _____ 10.00 _____ same _____**E. EMERGENCY FAXES** (per page - not including cover) _____ 25.00 _____ same _____**F. SPECIAL HANDLING** _____

Quantity	Call to order... Must provide credit card number for direct payment to UPS	same
1. UPS Overnight Delivery		
2. Express Mail, USPS (two-three day delivery)	33.00	same
3. Priority Mail, USPS (four-five day delivery)	11.00	same

G. 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** •

Breeding Certificate

This is to certify that Ram _____ 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)

Breeding Certificate

This is to certify that Ram _____ 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: _____

Artificial Insemination Certificate

This is to certify that Ewes _____
(List Ewe Names, Tag Numbers & Association Numbers)

were AI'd with _____ units/straws of semen from Ram _____ Registration # _____
(# used) (Ram Name & Tag Number) (Registration #)

Technician Print Name: _____ Date of Service: _____
Technician Signature: _____ Technician Contact Number: _____

Owner of ewes at time of Mating: _____ Owner of ram / semen at time of Mating: _____
(Signature) (Circle one) (Signature)

Address: _____ Address: _____

Embryo Transfer Certificate

This is to certify that Ewe _____ Registration # _____
(Donor Ewe's Name & Tag Number) (Ewe's Registration Number)

was flushed and _____ eggs were recovered on _____ bred to Ram _____
(# eggs) (Month, Day, Year) (Ram Name & Tag Number)

Registration # _____ . _____ eggs were implanted into recipient ewes on _____.
(Ram's Registration Number) (# eggs) (Month, Day, Year)

Technician Print Name: _____ Date of Service: _____
Technician Signature: _____ Technician Contact Number: _____

Owner of ewes at time of Mating: _____ Owner of ram / semen at time of Mating: _____
(Signature) (Circle one) (Signature)

Address: _____ Address: _____