## Important

Non-Member #

1. Type or Print Legibly

	1) P 0		5.			
2	Lambs	are ma	fure	after	12 1	nο

2.	Lambs	are	mature	after	12	months

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3	Proper	fees	must	accom	nany	all 1	wor

3.	Proper	fees	must	accom	pany	all	worl	ζ.

Sr.Member#	
Jr. Member#	

s must accompany all work	1 Hone. 765-450-6500
s must accompany an work	Breeder
	(Owner of Dam at Time of Mating)

 Address St. or Rt.
 Owner Owner of L

ADDRESS St. or Rt.\_

Phone: 785-456-8500	PO Box 27	<ul> <li>Sedalia</li> </ul>	MO 65302	<ul><li>Email:</li></ul>	asregistry@gmail.com

CITY

**AMERICAN HAMPSHIRE SHEEP ASSOCIATION** 

**REGISTRATION APPLICATION** 

<b>EEDER</b> vner of Dam at Time of Mating)			
DRESS OR RT.	Сіту	ST ZIP	
VNER vner of Dam at Time of Birth)			

American Hampshire **Sheep Association** 

Leave Blank	Nome of Animal	Birth Type Sg,Tw,Tr	3 Breeding Type Nat, AI, ET	4	5	- Sire	•	6 - Dam		7 - Transfer If sold, To Whom & Address (enclose transfer fee)
For Office Use Only	Name of Animal Private Flock Tag or Tattoo Number	Type	Nat, AI, ET	Birthdate	Registration 1	Name	Registration	Name	Date of Sale	& Address
Use Only	Tattoo Number	Sg, Tw, Tr			Registration Number	Name Private Flock Tag	Registration Number	Name Private Flock Tag	Date of Bare	(enclose transfer fee)
Sample	Huber 09-26	TW	Nat	2-27-87	508070	Wilson 50	96199A	Huber 85-23		
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## **ATTENTION**

- Please sign as Dam or Sire Owner or Both
  - Please Check Work for Accuracy.
- After Completion, Please Keep a Copy of this Form in Your File

Date
DAYTIME PHONE
EVENING PHONE
FAX NUMBER
E-Mail_

SIGNATURE OF UWNER OF DAM (time of lambing)	
SIGNATURE OF OWNER OF RAM (time of mating)	

Applications completed by partnership must also bear signature of a person authorized to sign for account.

Signature above represents:

"The information here is correct to the best of my knowledge and belief"