



## **Finnsheep Breeders Association REGISTRATION APPLICATION**

Phone: 785-456-8500 • PO Box 27 - Sedalia, MO 65302 • Fax: 785-456-8599

**Directions: Complete steps 1-18 and mail to the above address. Payment must accompany form. Detailed instructions are available online at [www.finsheep.org](http://www.finsheep.org).**

**1 Bred By:** \_\_\_\_\_  
(Owner of Dam at Time of Mating)

Address: \_\_\_\_\_

St/Rt/Box:

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Sr. Member #

Non-Member #

**2 Owned By:** \_\_\_\_\_  
(Owner of Dam at Time of Birth)

**(Owner of Dam at Time of Birth)**

## Address

St/Rt/Box:

City: \_\_\_\_\_ ST: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

\*Color: W=White; BL=Black; BR=Brown; G=Grey; F=Fawn    \*\*Marking: Bgr=Badgerface; RBgr=Reverse Badgerface; Bu=Blue; S=Solid    \*\*\*Spotting: Pie=Piebald; HST=Head, Socks & Tail

## 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

**18  
Payment Must Accompany  
Registration  
Refer to Fee Schedule for all  
Fees**

**16 SIGNATURE OF OWNER OF DAM**

(time of lambing) \_\_\_\_\_ Date \_\_\_\_\_

**17 SIGNATURE OF OWNER OF RAM**

(time of mating) Date

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

*Signature above represents:*

