



Finnsheep Breeders Association REGISTRATION APPLICATION

Purebred RAM

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.finnsheep.org

1 Bred By: _____
(Owner of Dam at Time of Mating)

Address:
St/Rt/Box: _____
City: _____ ST: _____ Zip: _____
Phone: _____ Email: _____

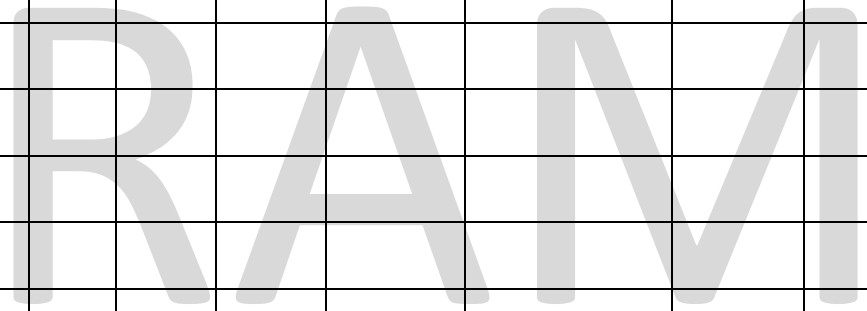
2 Owned By: _____
(Owner of Dam at Time of Birth)

Address:
St/Rt/Box: _____
City: _____ ST: _____ Zip: _____
Phone: _____ Email: _____

Sr. Member # _____
Jr. Member # _____
Non-Member # _____

*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

ANIMAL TO BE REGISTERED							SIRE		DAM			TRANSFER	
Leave Blank For Office Use Only	3 Name of Animal Private Flock Tag	4 Birthdate	5 Litter Size	6 Color*	7 Marking**	8 Spotting***	9 FBA Reg Number	10 Name of Animal Private Flock Tag	11 FBA Reg Number	12 Name of Animal Private Flock Tag	13 Months Lambing Age	14 Date Sold, If Sold	15 To Whom & Address (Enclose Transfer Fee)
SAMPLE	Huber 09-26	2-27-14	2	BL	S	Pie	82445	Wilson 50	82446	Wilson 51	22	-----	-----



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

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

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

