

AMERICAN RAMBOUILLET SHEEP BREEDERS ASSOCIATION WORK ORDER AND FEE SCHEDULE

Phone: 641-942-6402 • PO Box 51, 222 Main St - Milo, Iowa 50166 • Fax: 641-942-6502

Name _____ Membership # _____

Address _____ Website _____

City, State, Zip _____ Date _____

Phone # _____ Fax # _____ E-mail _____

Check one of the following:

- Senior/Active Member
 Junior Member (until age 19)
 Non-Member
 New Member Applying

A. MEMBERSHIPS	Quantity	Member Price	Non-Member Price	Total Cost
1. New Senior Member (include 1st year dues) _____		25.00	xxx	
2. Annual Senior Dues (Jan 1st - April 15th) _____		25.00	xxx	
3. Annual Senior Dues (after April 15th) _____		30.00	xxx	
4. New Junior Member (date of birth ____/____/____) _____		15.00	xxx	
5. Annual Junior Dues (date of birth ____/____/____) _____ (Jan 1st - April 15th)		15.00	xxx	
6. Annual Junior Dues (date of birth ____/____/____) _____ (after April 15th)		20.00	xxx	
7. Reinstate Membership _____		10.00	xxx	
B. REGISTRATIONS				
1. 0-25 head _____		6.50	13.00	
2. 26-49 head _____		6.00	12.00	
3. 50-100 head _____		5.50	11.00	
4. 101+ head _____		3.50	7.00	
C. TRANSFERS _____		5.50	11.00	
D. DUPLICATE CERTIFICATE _____		4.00	same	
E. EXTENDED PEDIGREE (only if not already provided on paper) _____		20.00	same	
F. NAME CHANGE / CHRISTENING				
1. Rams _____		15.00	same	
2. Ewes _____		10.00	same	
G. RUSH FEE (per each registration & transfer) _____		Double Fees	same	
H. EMERGENCY FAXES (per page - not including cover) _____		3.00	same	
I. SPECIAL HANDLING				
1. UPS Overnight Delivery _____		<i>Call to order... Must provide credit card number for direct payment to UPS</i>		
2. Postal Overnight, USPS (two-three day delivery) _____		18.30	same	
3. Priority Mail, USPS (four-five day delivery) _____		4.95	same	
J. OTHER FEES _____				

TOTAL FEES FROM ABOVE\$ _____

Previous Balance Due (please return invoice).....\$ _____

Previous Credit Due (please return invoice)\$ _____

TOTAL MONEY ENCLOSED -- CHECK # _____ (cash or blank checks sent at own risk).....\$ _____

Breeding Certificate

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

were 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 _____ Registration # _____
(Ram Name & Tag Number) (Registration Number)

were 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 _____ Registration # _____
(Ram Name & Tag Number) (Registration Number)

were 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 _____ Registration # _____
(Ram Name & Tag Number) (Registration Number)

were 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: _____