



13853 Wyoming St. • Lucas, IA 50151
 Phone: 641-466-3614
 Email: registrar@staugustinehairsheep.com

St. Augustine Hair Sheep Association • Registration Application

Breeder Info (<i>Owner of Dam at time of mating</i>) Member # _____ Flock Prefix _____ Name _____ Address _____ City, State, Zip _____	Owner Info (<i>Owner of Dam at time of lambing</i>) Member # _____ Flock Prefix _____ Name _____ Address _____ City, State, Zip _____
---	--

For Office Use Only	Flock Prefix & Name/Tag	Ram/Ewe	Date of Birth	Birth Type Sg/Tw/Tr	Sire Reg #	Sire Name/Tag	Dam Reg #	Dam Name/Tag	Transfer To: Name/Address/Phone (if sold)	Transfer Date (if sold)

ATTENTION

- Please sign as Dam or Sire Owner or both
- Please check work for accuracy
- Proper Fees must accompany work (include transfer fee for each transfer)
- After completion, please keep a copy of this form for your files

Date _____
 Daytime Phone _____
 Evening Phone _____
 Fax Number _____
 Email _____

Signature of Owner of Dam (*at time of lambing*) _____

Signature of Owner of Sire (*at time of mating*) _____

*Signature above represents:
 "The information here is correct to the best of my knowledge and belief"*