

# AMERICAN GOTLAND SHEEP SOCIETY WORK ORDER AND FEE SCHEDULE

Phone: 785-456-8500 • PO Box 231, 420A Lincoln - Wamego, KS 66547 • Fax: 785-456-8599 • asregistry@gmail.com

Name \_\_\_\_\_ Membership # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Website \_\_\_\_\_

Daytime Phone # \_\_\_\_\_ Alternate Phone # \_\_\_\_\_ Date \_\_\_\_\_  
*Between 8-5*

Check one of the following:

Active Member       Associate Member       Junior Member       New Member Applying

	Quantity	Member Price	Total Cost
<b>A. MEMBERSHIPS</b>			
1. Active Members _____		15.00	
2. Associate Members _____		10.00	
3. Junior Members (date of birth ____/____/____) _____		5.00	
<b>B. REGISTRATIONS</b>			
1. Ewe/Ram Registration (under 18 months) _____		8.00	
2. Ewe/Ram Registration (over 18 months) _____		16.00	
3. Ewe/Ram Recording (under 18 months) _____		5.00	
4. Ewe/Ram Recording (over 18 months) _____		10.00	
5. Foundation Ewes (under 18 months) _____		5.00	
<b>C. TRANSFERS</b> _____		5.00	
<b>D. DUPLICATE CERTIFICATE</b> _____		5.00	
<b>E. RUSH FEE</b> (per each registration & transfer) _____		<i>Double Fees</i>	
<b>F. EMERGENCY FAXES</b> (per page - not including cover) _____		3.00	
<b>G. SPECIAL HANDLING</b>			
1. UPS Overnight Delivery _____		<i>Call for pricing</i>	
2. Postal Overnight, USPS (two-three day delivery) _____		26.00	
3. Priority Mail, USPS (four-five day delivery) _____		8.00	
<b>H. OTHER FEES</b> _____			

**TOTAL FEES FROM ABOVE**.....\$ \_\_\_\_\_

**Previous Balance Due** (please return invoice).....\$ \_\_\_\_\_

**Previous Credit Due** (please return invoice) .....\$ \_\_\_\_\_

**TOTAL AMOUNT DUE** .....\$ \_\_\_\_\_

**PAYMENT BY CHECK #** \_\_\_\_\_ **OR PAYPAL #** \_\_\_\_\_

**PAYPAL PAYMENT CAN BE COMPLETED ON THE AMERICAN GOTLAND SHEEP ASSOCIATION WEBSITE.**

• **ALL WORK requested MUST HAVE accompanying PAYMENT TO PROCESS** •

## Breeding Certificate

This is to certify that Ram \_\_\_\_\_ AGSS 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 \_\_\_\_\_ AGSS 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: \_\_\_\_\_