

American Dorper Sheep Breeders' Society



Junior

Membership Application

(21 and under, January 1st of Member Year)

Annual Dues \$25.00

Name: _____ Date of Birth: _____

Address: _____

City: _____ State: _____ ZipCode: _____

Telephone: _____ Fax: _____

E-mail: _____

Website _____

Circle the Following that Apply to You

Fullblood Dorpers	Purebred Dorpers	Percentage Dorpers	Fullblood White Dorpers	Purebred White Dorpers	Percentage White Dorpers	Semen	Embryos	Breeding Services	Scrapie Enrolled Flock
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Flock Name ~ Each animal registered is identified with a flock name, along with a flock number.

First Choice Flock Name _____

Second Choice Flock Name _____

I certify that I desire to become a member of the American Dorper Sheep Breeders' Society. I agree to honorably promote the Dorper sheep breed, support and obey the American Dorper Sheep Breeders' Society Articles of Incorporation and Bylaws and the Breeders' Guidelines.

Signature

Date

Make check payable to **ADSBS** and forward to:

American Dorper Sheep Breeders' Society
PO Box 259
Hallsville, MO 65255
Telephone: 573-696-2550 Fax: 573-696-2030