



APPLICATION FOR REGISTRATION

RAMS

(Use **ONLY** for Male Dorpers & White Dorpers Being Registered for the First Time)
 FEEL FREE TO MAKE PHOTOCOPIES OF THIS APPLICATION

Mail Dorper Work To:
 A.D.S.B.S
 P.O. Box 259
 Hallsville, MO 65255-0259
 Telephone: 573-696-2550
 Fax: 573-696-2030
 Website: www.dorper.org

						BREEDER <small>Recorded Dam Owner at Breeding</small>					
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Member Code					Membership Name			Address	City	State	Zipcode	Phone
					OWNER <small>Recorded Dam Owner at Lambing</small>							

Member Code					Membership Name			Address	City	State	Zipcode	Phone
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Flock Name _____ DORPER WHITE DORPER

Office Use	Tag Number	Permanent Identification (if any)	Birth Date mm/dd/yy	Type of Birth	%	X if AI	ET	Sire's Flock Name & Number	Sire's Registration Number	Dam's Flock Name & Number	Dam's Registration Number
	TRANSFER OF OWNERSHIP	Date of Sale	Name and Address of Purchaser								
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I hereby certify that the above information is accurate and the animals being registered are in compliance with ADSBS rules and do not exhibit disqualifying faults. _____
 Signature of person completing application Date