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 Recorded Dam Owner at Breeding						
Member Code						Membership Name		Address	City	State	Zipcode	Phone
						OWNER Recorded Dam Owner at Lambing						
Member Code						Membership Name		Address	City	State	Zipcode	Phone

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**								
	TRANSFER OF OWNERSHIP	**Date of Sale**	**Name and Address of Purchaser**								
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	TRANSFER OF OWNERSHIP	**Date of Sale**	**Name and Address of Purchaser**								

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.

X _____
Signature of person completing application — Date

(11/02/2009)