# Gotland Sheep Breeders Association of North America Work Order and Fee Schedule

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

<table>
<thead>
<tr>
<th>Name</th>
<th>Membership #</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address</td>
<td>Website</td>
</tr>
<tr>
<td>City, State, Zip</td>
<td>Date</td>
</tr>
<tr>
<td>Phone #</td>
<td>Fax #</td>
</tr>
</tbody>
</table>

Check one of the following:

A. □ New Member □ Renewal
B. □ Check Enclosed □ Paypal Payment Sent

## A. Memberships

<table>
<thead>
<tr>
<th>Quantity</th>
<th>Member Price</th>
<th>Total Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Junior (no voting privileges) (date of birth / / )</td>
<td>5.00</td>
<td></td>
</tr>
<tr>
<td>2. Active (one vote per farm)</td>
<td>15.00</td>
<td></td>
</tr>
<tr>
<td>3. Associate (no voting privileges)</td>
<td>10.00</td>
<td></td>
</tr>
</tbody>
</table>

## B. Ewe/Ram Registrations

8.00

## C. Ewe/Ram Recording

5.00

## D. Transfer of Ownership

5.00

## E. Foundation Sheep

5.00

## F. Duplicate Certificate

5.00

## G. Changes to Animal

1. Reprint with Name or Ear Tag # Changed
2. Change Name or Ear Tag #

(In accordance with general rules 07 & 08 on the GSBANA Instruction Sheet)

## H. Imported AI Rams & Imported ET Sheep

15.00

## I. Dual Registered Sheep

15.00

(AGSS registered without parents in the GSBANA database)

## J. Rush Fee (per each registration & transfer)

5.00

## K. Emergency Faxes (per page - not including cover)

3.00

## L. Special Handling

<table>
<thead>
<tr>
<th>Call to order</th>
<th>Must provide credit card number for direct payment to UPS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. UPS Overnight Delivery</td>
<td>same</td>
</tr>
<tr>
<td>2. Postal Overnight, USPS (two-three day delivery)</td>
<td>26.00</td>
</tr>
<tr>
<td>3. Priority Mail, USPS (four-five day delivery)</td>
<td>8.00</td>
</tr>
</tbody>
</table>

## M. Other Fees

**TOTAL FEES FROM ABOVE** ................................................................. $

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

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

**PayPal Fees** ......................................................................................... $

**TOTAL AMOUNT DUE** ................................................................. $

**PAYMENT BY** Check # □ or Credit Card # □

**Expiration Date on Card** □ **Three Digit Code on Back of Card** □

**Zip Code of Billing Address** □ **Signature of Cardholder** □

*All credit card transactions will be charged a 15 cent transaction fee and a 3.5% convenience fee on the total amount.

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