

AMERICAN ROMNEY BREEDERS ASSOCIATION WORK ORDER AND FEE SCHEDULE

Phone: 785-456-8500 • PO Box 231, 305 Lincoln - Wamego, KS 66547 • Fax: 785-456-8599 • asregistry@gmail.com

Name _____ Membership # _____

Address _____ Website _____

City, State, Zip _____ Date _____

Phone # _____ Fax # _____ E-mail _____

Check one of the following:

Senior Member Junior Member (until age 20) Non-Member

A. MEMBERSHIPS

Complete form for new or renewal and submit, with fees, to:

ARBA Secretary
58221 Lee Valley Road.
Coquille, OR 97423

	Quantity	Member Price	Non-Member Price	Total Cost
B. REGISTRATIONS				
1. Up to end of calendar year, following year of birth _____		7.00	13.00	
2. After Dec 31st of year, following year of birth _____		11.00	18.00	
3. Imported Animals _____		26.00	31.00	
C. TRANSFERS				
1. Up to 60 days from date of sale _____		6.00	11.00	
2. After 60 days from date of sale _____		9.00	15.00	
3. Semen Transfer - Up to 60 days _____		5.00	11.00	
4. Semen Transfer - After 60 days _____		9.00	15.00	
D. DUPLICATE CERTIFICATE		6.00	6.00	
E. FIVE GENERATION TRACE BACK		11.00	13.00	
F. NON ARBA REGISTERED ROMNEYS FROM OTHER DOMESTIC FLOCK BOOKS TRACE BACK		5.00	same	
G. NAME CHANGE / CHRISTENING				
1. Rams _____		26.00	same	
2. Ewes _____		11.00	same	
H. RUSH FEE (per each registration & transfer) _____		Double Fees	same	
I. EMERGENCY FAXES (per page - not including cover) _____		3.00	same	
J. SPECIAL HANDLING				
1. UPS Overnight Delivery _____		Call for pricing	same	
2. Postal Overnight, USPS (two-three day delivery) _____		24.00	same	
3. Priority Mail, USPS (four-five day delivery) _____		7.00	same	
K. WEBSITE LINK IN DIRECTORY (provide URL above) _____		5.00	same	
L. AI Semen Collection Fee _____		25.00	same	
M. OTHER FEES _____				

TOTAL FEES FROM ABOVE\$ _____

Previous Balance Due (please return invoice).....\$ _____

Previous Credit Due (please return invoice)\$ _____

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** •

Breeding Certificate

This is to certify that Ram _____ ARBA 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 _____ ARBA 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: _____