

# AMERICAN BORDER LEICESTER ASSOCIATION WORK ORDER AND FEE SCHEDULE

Phone: 785-456-8500 • PO Box 231, 305 Lincoln - Wamego, KS 66547 • Fax: 785-456-8599  
New rates effective July 1, 2015

Name \_\_\_\_\_ Membership # \_\_\_\_\_

Address \_\_\_\_\_ Website \_\_\_\_\_

City, State, Zip \_\_\_\_\_ Date \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ E-mail \_\_\_\_\_

Check one of the following:

Senior/Active Member     Junior Member (until age 21)     Non-Member     New Member Applying

	Quantity	Member Price	Non-Member Price	Total Cost
<b>A. MEMBERSHIPS</b>				
1. New Senior Member _____		30.00		
2. Annual Senior Dues _____		30.00		
3. New Junior Member (date of birth ____/____/____) _____		20.00		
4. Junior Dues (date of birth ____/____/____) _____		20.00		
<b>B. REGISTRATIONS</b> _____		7.00	14.00	
<b>C. TRANSFERS</b> _____		7.00	14.00	
<b>D. DUPLICATE CERTIFICATE</b> _____		3.00	same	
<b>E. RUSH FEE</b> (per each registration & transfer) _____		7.00	same	
<b>F. EMERGENCY FAXES</b> (per page - not including cover) _____		3.00	same	
<b>G. SPECIAL HANDLING</b>				
1. UPS Overnight Delivery _____		<i>Call to order... Must provide credit card number for direct payment to UPS</i>		
2. Postal Overnight, USPS (two-three day delivery) _____		24.00	same	
3. Priority Mail, USPS (four-five day delivery) _____		6.00	same	
<b>H. OTHER FEES</b> _____				

**Please send Membership Dues**  
Jack Price, ABLA Treasurer  
628 N. 1150 East Rd., Palmer, IL 62556  
Phone: (217) 502-4082

**TOTAL FEES FROM ABOVE** .....\$ \_\_\_\_\_

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

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

**TOTAL MONEY ENCLOSED -- CHECK #** \_\_\_\_\_ (cash or blank checks sent at own risk).....\$ \_\_\_\_\_

## Breeding Certificate

This is to certify that Ram \_\_\_\_\_ 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: \_\_\_\_\_

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(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: \_\_\_\_\_

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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: \_\_\_\_\_