



American Sheep Industry Association Membership Application

Please Print Clearly

Name _____

Farm Name _____

Address _____

City _____ State _____ Zip _____

Phone (____) _____ Fax (____) _____

Email _____ No. of Sheep _____ No. of Goats _____

Please circle all that apply:

Commercial	Purebred	Club Producer
Dairy	Lamb Feeder	Shearer
Allied Industry or Business		

ASI Yearly Membership

Individual member	\$.035 per head or \$50 minimum (whichever is greater)	\$ _____
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<u>TOTAL</u>	\$ _____
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Please make checks payable to: American Sheep Industry Association
9785 Maroon Circle, Suite 360
Englewood, Colorado 80112

Or use your *credit card*. VISA _____ MASTERCARD _____ 3 digit security code _____
AMEX _____ (on back of card)

Account Number _____ Expiration Date _____

I authorize the charge of my ASI dues to this credit card. _____
Signature

For more information, call 303-771-3500 or email info@sheepusa.org

Thank you for taking an active interest in your industry. Current Date _____