

Guard Dog

(Please fill out your information as you wish it to appear on recognition material.)
To ensure your contribution is recognized in our convention materials please submit
this form by December 1st.

First Name:	Spouse's Name:
Last Name:	
Ranch/Farm Name:	
Shipping Address:	
City, State, Zip Code:	
Phone, E-mail:	
YES, I would like to beco	me a member of The Guard Dogs!
(Note: If you wish to sub	mbership - \$750.00 (per person or company) mit your payment in two installments, we will mail er receiving the second payment.)
Supporting	Membership - \$250 or \$500 (per person or company)
Please return this form to:	American Sheep Industry Association Attn: Guard Dog Membership 9785 Maroon Circle, Suite 360

Englewood, CO 80112