

American Oxford Sheep Association, Inc.

MEMBERSHIP APPLICATION

A membership application is contained on the Application for Registration form. This form is for use in memberships without registration.

Name for Membership Records:	
Street Address: City, State & Zip Code	
Mailing Address City, State & Zip Code	
Telephone Number(s):	
Email Address:	
Website Address:	
If Junior member, birth date:	

The undersigned for himself/herself and/or by his/her parent or guardian, applies for membership to the American Oxford Sheep Association, Inc. The undersigned acknowledge(s) that he/she has carefully read, is knowledgeable of and agrees abide by the rules of the American Oxford Sheep Association, Inc.

Date Signed: _____

Signature of Member: _____

Signature of Junior Member's Parent or Guardian: _____
(If junior member is under 18 years old)

Printed Name of Junior Member's Parent and/or Guardian: _____

Send Membership Application to:

American Oxford Sheep Association, Inc.
Mary Blome, Secretary
1960 E. 2100 North Road
Stonington, Illinois 62567
Telephone: (217) 325-3515
Fax: (217) 325-3525
Website: www.americanoxfords.org