

DIRECTORY/MEMBERSHIP FORM

ARKANSAS STATE SHEEP COUNCIL

NAME _____

BUSINESS NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE NUMBER _____

E-mail ADDRESS _____

VARIETY (PLEASE CIRCLE ALL THAT APPLY)

COMMERICAL SHEEP

REGISTERED SHEEP

CLUB LAMBS

GUARD ANIMALS

BREED (S) RAISED _____

Dues: \$30.00 a year for membership and \$60.00 for ASSC breeder-
(membership included).

Would you like to make a donation to ASSC? _____

Donation: Please designate: ABL Program \$ _____

SCHOLORSHIP \$ _____

OTHER \$ _____

Please enclose any additional information that you would like.

Return to: **ASSC, Wanda Calloway, Treas.**

P O Box 243

Omaha, AR 72662

870-853-7404

wjcalloway@gmail.com