



CANADIAN DORPER SHEEP ASSOCIATION

MEMBERSHIP APPLICATION / RENEWAL FORM

Name: _____

Farm: _____ **Flock letters** _____

Address: _____

City: _____ **Prov.** _____ **pc.** _____

Phone: _____ **Fax:** _____

E-Mail _____ **Website:** _____

Membership fee: (one vote) \$25.00 or \$500 for Life member

Membership Year: January 1-December 31.

Cheque: _____ cash _____ e-transfer _____

Note: Our membership list is available to anyone requesting information on Dorpers from this association from our webpage: (www.canadiandorpers.org) if you do not want any information publicized electronically or otherwise, you must inform the CDSA so we can screen that information.

***If you own at least one REGISTERED DORPER and are eighteen years of age or older, please complete this voting information.

Name of voting member: _____

Signature of voting member: _____

Mail to: Canadian Dorper Sheep Association

C/O **Lorna Wall Box 184 Cartwright, MB R0K 0L0**
Scan and email to **wall2wallsheep@yahoo.ca**