REGISTRATION FORM

2016 Buckeye Shepherds Symposium ~ December 9-10, 2016

| Name: | | | |
|---|--|---------------------------------|---------------|
| Mailing Address: | | | |
| City: | | | ostal Code: |
| Telephone: () | Fax:() | Email: | |
| REGISTRATION FEES | | | |
| Please check appropriate registration fee: Friday Program (Refreshments only provided) | POSTMARKED & PAID BEFORE/ON NOV. 18 | AFTER NOV. 18 | |
| Individual: Number attending | ☐ \$15 each | ☐ \$25 each | \$ |
| Saturday Program (Program, continental brea | | | |
| Individual: Number attending | ☐ \$35 each | ☐ \$45 each | \$ |
| | | 3104 - Total Registra | ation Fees \$ |
| LEGIBLY PRINT NAMES OF THOSE ATT | ENDING (REQUIRED): | | |
| Birthdate required ONLY for any youth under Ag | | | |
| Name | | Birthdate: | |
| PAYMENT OF 2017 OSIA MEMBERSHIP | P DUES: | | |
| ☐ 3002 – Family, Farm or Individual: \$35 | \square 3005 – Association: \$35 | | |
| ☐ 3008 – Youth (22 and under): \$15 | ☐ 3010 – Corporate/Allied Indu | stry: \$100 | \$ |
| | | Total | Enclosed: \$ |
| PAYMENT METHOD: | | | |
| Make checks payable and mail to: | Or pay by Visa or MasterCard | | |
| Ohio Sheep Improvement Association | Cardholder Name (please print): | | |
| Roger A. High, Executive Director | Visa/MC Card#: | | |
| P.O. Box 182383 | 3-digit code: Ar | | |
| Columbus, OH 43218 | Signature: | | |
| | Today's date: | | |
| PayPal at: www.ohiosheep.org | Any questions, please call 614 | 1-246-8262 or email <u>ahur</u> | st@ofbf.org. |

A block of hotel rooms are being held for Buckeye Shepherd attendees until November 18, 2016 Hilton Garden Inn 959 Dover Rd. Wooster, OH 44691 Phone: 330-202-7701 Rate: \$104.00

Code: BSS