



# CANADIAN SHEEP BREEDERS ASSOCIATION



KATAHDIN INSPECTOR

APPLICATION/DECLARATION FORM

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CSBA ID# \_\_\_\_\_

TELEPHONE DAY: ( ) \_\_\_\_\_ - \_\_\_\_\_

EVENING: ( ) \_\_\_\_\_ - \_\_\_\_\_

FAX: ( ) \_\_\_\_\_ - \_\_\_\_\_

CELL: ( ) \_\_\_\_\_ - \_\_\_\_\_

EMAIL: \_\_\_\_\_

I \_\_\_\_\_ a member in good standing with the CSBA, do hereby make application to become an COAT GRADING INSPECTOR for the Canadian Katahdin Sheep Society and upon acceptance of my qualifications, agree to conform to the by-laws of the Canadian Sheep Breeders Association and the protocols of the Canadian Katahdin Sheep Society for coat grading.

\_\_\_\_\_/\_\_\_\_\_  
(Signature of applicant) (Initials as will be used on the reg. form)

Date: \_\_\_\_\_

**TO BE COMPLETED BY CKSS DIRECTOR**

I confirm that \_\_\_\_\_ on this day has qualified as a CKSS coat grading inspector.

**PERSON AUTHORIZED BY CKSS TO INSTRUCT THE ABOVE ON COAT GRADING OF KATAHDIN SHEEP:**

**AUTHORIZED DIRECTOR:** \_\_\_\_\_

**SIGN:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**ASSIGNED CKSS INSPECTOR ID NUMBER:** \_\_\_\_\_