

Affiliate Membership

Name (Organization, Company or Department):	
Address:	
Email:	Tel. No.:
We (I) hereby apply for membership and do hereby Constitution, By-Laws and Ethics Policy, and pay a m of the Canadian Sheep Federation Ethics Policy is at	
Signature of Authorized Representative	Date
Name of Appointed Director:	
Director Address:	
Director Email:	Director Tel. No.:
Name of Alternate Director:	
Alternate's Address:	
Alternate's Email:	
	used for all official Canadian Sheep Federation ondence.
As Director and Alternate appointed on behalf of hereby agree to conform to the Canadian Sheep Fed signed copy of the Canadian Sheep Federation Ethic	deration Constitution, By-Laws and Ethics policy. A
Director Signature	Date
Alternate's Signature	

MEMBERSHIP IS FOR THE CANADIAN SHEEP FEDERATION FISCAL YEAR (September 1 through August 31) AND IS DUE SEPTEMBER 1ST EACH YEAR. Applications for membership will be pro-rated.

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