

Registration Form
2017 Buckeye Shepherds Symposium
December 1-2, 2017

Full Name: _____

Mailing Address: _____

City: _____ State/Province: _____ Zip/Postal Code: _____

Telephone: (____) _____ Fax: (____) _____ Email: _____

1. Registration Fees

POSTMARKED & PAID

PLEASE CHECK APPROPRIATE REGISTRATION FEE:

BEFORE/ON NOV. 17 AFTER NOV. 17

Friday Program (Refreshments only provided)

OSIA Member - Individual – Number attending _____	<input type="checkbox"/> \$15 each	<input type="checkbox"/> \$25 each	\$ _____
Non-Member – Individual – Number attending _____	<input type="checkbox"/> \$30 each	<input type="checkbox"/> \$45 each	\$ _____
Student – 18 to 22 Years of Age	<input type="checkbox"/> \$5 each	<input type="checkbox"/> \$10 each	\$ _____

Saturday Program (Program, continental breakfast, lamb luncheon, afternoon break)

OSIA Member - Individual – Number attending _____	<input type="checkbox"/> \$35 each	<input type="checkbox"/> \$45 each	\$ _____
Non-Member – Individual – Number attending _____	<input type="checkbox"/> \$50 each	<input type="checkbox"/> \$65 each	\$ _____
College Student – 18 to 22 Years of Age	<input type="checkbox"/> \$15 each	<input type="checkbox"/> \$25 each	\$ _____
Special Program: High School Youth ATI Recruiting Program	<input type="checkbox"/> Free	<input type="checkbox"/> Free	\$ _____

Name _____ Age _____

- **NOTE: OSIA Membership can be paid with this BSS Registration Form**

3104 - Total Registration Fees \$ _____

2. Legibly Print Names of ALL those attending (REQUIRED):

Birthdate required ONLY for any youth under Age 22 as of 1/1/2018

Name _____ Birthdate: _____

Name _____ Birthdate: _____

Name _____ Birthdate: _____

Name _____ Birthdate: _____

3. Payment of 2018 OSIA Membership Dues:

<input type="checkbox"/> 3002 - Family, Farm or Individual: \$35	<input type="checkbox"/> 3005 – Association: \$35	
<input type="checkbox"/> 3008 - Youth (22 and under): \$15	<input type="checkbox"/> 3010 - Corporate/Allied Industry: \$100	\$ _____

TOTAL ENCLOSED: \$ _____

PAYMENT METHOD: Checks made payable to: **Ohio Sheep Improvement Association (OSIA)**. Please mail completed registration from with payment to:
OSIA-BSS 2016, P.O. Box 182383, Columbus OH 43218-2383.

Any questions please call 614-246-8293 or email ahurst@ofbf.org.

Make checks payable and mail to:

Ohio Sheep Improvement Association
 Roger A. High, Executive Director
 P.O. Box 182383
 Columbus, OH 43218-2383
PayPal at:
www.ohiosheep.org

Or pay by Visa or MasterCard

Cardholder Name (please print): _____
 Visa/MC Card#: _____
 3-digit code: _____ Amount: \$ _____ Exp. Date: _____
 Signature: _____
 Today's date: _____