

American Tobiano Overo Association (ATOA)

Horse Registration Application



Please complete all sections. Incomplete applications may delay processing.

I. Owner Information

- Owner Name: _____
- Farm/Ranch Name (if applicable): _____
- Mailing Address: _____
- City/State/ZIP: _____
- Phone: _____ Email: _____
- ATOA Membership Number (if applicable): _____

II. Breeder Information (Breeder of This Horse)

- Breeder Name: _____
- Farm/Ranch Name (if applicable): _____
- Mailing Address: _____
- City/State/ZIP: _____
- Phone: _____ Email: _____
- ☐ Same as Owner

III. Horse Information

- Registered Name: _____
- Barn Name: _____
- Date of Birth (MM/DD/YYYY): _____
- Sex: ☐ Stallion ☐ Mare ☐ Gelding
☐ If Gelding, Date Gelded: _____
- Color: _____
- Pattern: ☐ Tobiano ☐ Overo ☐ Tovero ☐ Solid Paint-Bred ☐ Other: _____
- Height (if known): _____
- Markings/Identifiers: _____

IV. Pedigree Information

- Sire (Registered Name): _____
☐ Sire Registration No. & Registry: _____
- Dam (Registered Name): _____
☐ Dam Registration No. & Registry: _____

V. Prior Registration (if applicable)

- **Previously Registered With:** ☐ APHA ☐ AQHA ☐ Other: _____ ☐ None
- **Previous Registration Number:** _____

VI. DNA / Genetic Testing (if applicable)

- **DNA on File:** ☐ Yes ☐ No
- **Testing Lab:** _____
- **Results / Panel Submitted:** _____

VII. Registry Placement (ATOA Use)

- **Requested Registry:** ☐ Regular Registry ☐ Solid Paint-Bred Registry

VIII. Photographs Required

Attach clear color photos showing:

- ☐ Left Side View
- ☐ Right Side View
- ☐ Front View
- ☐ Rear View
- ☐ Close-ups of qualifying Paint markings (if applicable)

IX. Fees

- **Registration Fee:** \$ see fee schedule last page
- **Late Fee (if applicable):** \$10.00
- **Total Enclosed:** \$ _____

Payment Methods Accepted: ☐ Check ☐ Money Order ☐ Other (as approved by ATOA)

X. Owner & Breeder Certification

I/We certify that the information provided on this application is true and correct to the best of my/our knowledge. I/We understand that submission of false or misleading information may result in denial or revocation of registration.

- **Owner Signature:** _____
- **Owner Printed Name:** _____
- **Date:** _____
- **Breeder Signature:** _____
- **Breeder Printed Name:** _____
- **Date:** _____

XI. Office Use Only (ATOA)

- **Date Received:** _____
- **Application Complete:** ☐ Yes ☐ No

- **Registry Assigned:** _____
- **ATOA Registration Number:** _____
- **Reviewed By:** _____
- **Certificate Issued Date:** _____

Submit completed application and supporting documents to:

American Tobiano Overo Association (ATOA)

Email: atoapaints@gmail.com

Website: ATOApaints.com

Physical Address: 789 W M-113, Kingsley, Mi 496498

2026 FREE SCHEDULE

WEANLING: (JAN 1-JULY1)	\$25.00
WEANLING (JULY 2-DEC 31)	\$35.00
YEARLING	\$40.00
2-YEAR-OLD	\$50.00
3-YEAR-OLD	\$60.00
4-YEAR-OLD and older	\$70.00
Transfer fee:	\$20.00
Late Fee:	\$10.00