



Pinto Horse Association of NSW Inc

PO Box 96

Austral NSW 2179

Phone: 0408 628965 (between 5.00pm – 8pm)

¶ Pinto Stands Out In ¶ Crowd

Email: nswpinto@gmail.com

Application For Horse / Foal Registration

Please Print Clearly

Fees under 2yrs: Colts: _____ Fillies: _____ Geldings: _____ Permanent Fillies: _____

Fees 2yrs & over: Stallions: _____ Mares: _____ Hardship/ App Mare _____ Geldings: _____

(Except For Geldings) Horse's born after 01/08/1982 must be by a registered stallion. After 01/08/1987 both parents must be registered

Name of Horse Prefix: _____ Choice of 3 (Three) Names

Max. Length 30 (Thirty) letters including prefix & spaces.

1) _____

2) _____

3) _____

Horse Details

Sex: Stallion Mare Gelding Height: _____ hands _____ inches

Pattern: Tobiano Tobero Overo Sabino Colour: _____

Microchip No: _____ Brand: _____

Foaling Date: _____ / _____ / _____

Previously Foal Recorded: Yes No Name Of Society _____ Rego No: _____

Bred By: _____

Address _____ Post Code: _____

Phone: _____ Mobile _____

Email: _____

Photographs x 5 (five) must accompany this application. 2 of the side with the most colour. 1 of the other side. 1 showing FULL front. 1 showing the rear. All photos must not exceed 8cm x 8cm.

Ancestry

- The Ancestry must be filled in (except for Geldings) with authenticating documents.
For Example: Stallion Service Certificate or other breeds registration. Copies
- Copies of relevant documents must be included.
- If the Dam is not registered with the Pinto Horse Association of NSW Inc, a photocopy of her breed registration papers must accompany this application.
- If Sire or Dam is registered with other horse societies, please note society and registration number.

Sire: _____ Sire: _____

Colour: _____ Pattern: _____ Colour: _____ Pattern: _____

Horse Society: _____ Pattern: _____ Dam: _____

Registration No: _____ Colour: _____ Pattern: _____

Dam: _____ Sire: _____

Colour: _____ Pattern: _____ Colour: _____ Pattern: _____

Horse Society: _____ Pattern: _____ Dam: _____

Registration No: _____ Colour: _____ Pattern: _____

Owner's Name/s: _____

Address _____ Post Code: _____

Phone: _____ Mobile _____

Email: _____

Certification: I believe the above information is true and correct to the best of my knowledge.

Owner's Signature: _____ Date: _____

(If registered in joint names all signatures are required.)

If owner is under 18years of age, parent/ guardian signature is also required.