



Pinto Horse Association of NSW Inc

PO Box 96

Austral, NSW, 2179

Phone: 0408 628965 (between 5.00pm – 8.00pm)

A Pinto Stands Out In A Crowd

Email:nswpinto@gmail.com

**Veterinary Report to accompany application for registration of a Stallion,
Hardship Mare or Appendix Mare**

Name of Owner: _____

Name of Horse: _____

Horse's age (as of 1 August): _____

Colour: _____ Pattern: Tobiano/ Overo/ Solid

Brands: _____

Microchip Number(if applicable): _____

Undesirable Characteristics: Osteoporosia, Stringhalt, Sidebone, Ringbone, Club Foot, Offset Cannons, Scrotal Hernia, Roaring, Shivering, Pneumovaginitis.

Unacceptable Faults: Cryptorchidism, Monorchidism, Parrot Mouth, undershot Jaw, Cataract, Polydactylia.

Comments By Veterinary Surgeon (if applicable):

Declaration:

I have examined the horse named above and based upon this examination and as at this date consider it to sound, and free from hereditary defects. I have identified the horse from the photographs provided by the owner, and I have signed the back of each photograph.

The Horse was examined on (date) Day _____ Month _____ Year _____

Signed: _____

Name: _____

Business Name _____

Address: _____

Phone: _____