

Office use only

Date:

Regn N°:

Application for Registration

Payment: By Direct Credit BNZ # 02 0191 0313930 00 or cheque payable to NZ Iberian Horse Assn Inc Please post ALL forms complete with SAE to:

Jane Holm, NZ Iberian Horse Assn 85 Heald Rd, Hunua, RD3 Papakura, Auckland 2583

Tick	REGISTRATION CHECKLIST FEES	
	Payment is included / paid by direct credit	
	NZIHA Membership [if not already a member]	\$25
	Both parents are registered with NZIHA	\$20
	Or ONE parent is registered with NZIHA	\$30
	Or NO parents are registered with NZIHA	\$40
	YES I have included my Stamped Addressed Envelope	
	ALL relevant paperwork is included	

NOTE:

- ALL Owners/Breeders/Agents registering horses must be current financial members of NZIHA. No exceptions.
- ALL paperwork must be included with this form including breeding service certificate from .the stallion owner.
- All purebred horses are to be DNA tested.
- All horses to be permanently ID by Microchip or brand.
- Please refer to NZIHA current Registration Regulations as per our website for further details.

Please write clearly in BLOCK letters, especially horses information & your contact details!						
Choice of Name for Horse		Breeder Name & Address: (If different to	Owner)			
1 st	DOB:	Name:				
2 nd	Sex:	Address:				
3 rd	Colour:	Email:				
SIRE:	Sire:	NOTE: Permanent Identification is Requi	red in the form of a Microchip or Brand			
Breed:	Dam:	Microchip N°:				
YOB: Reg N°:						
DAM:	Sire:	Brand Details: (If no Microchip) Please sh	now location & details on diagrams below			
Breed:		Near Side:				
YOB: Reg N°:		Offside:				
Identifying Ma	rkings and Features – These N	MUST be completed by and signed by a ve	eterinarian			
Left Fore:		Right Fore:				
Left Hind:		Right Hind:				
Head:		Other:				
this certificate Owner/Agent NOTE: Or	er/Agent and the Veterinarian - certif taken for the purpose of the studbo certify that we are a current financia	Fore Legs Rear View Fore Legs Rear View Fy to the correctness of the description shown on ook requirements of this Association. We the I member of NZ Iberian Horse Association. In register horses. ALL forms	Right Side			
	Form C	Completed by				
Owner/Agent:		Email:	Ph:			
Address:		Date:	Owner Signature:			
Veterinarian:		Date:	Veterinarian Signature:			
Ph: Email:						