

REGISTRATION APPLICATION

THE SOUTH AFRICAN QUARTER HORSE ASSOCIATION
P.O. BOX 32133, Fichardt Park, Bloemfontein, 9317 TEL: 071 471 3684 FAX: 086 2

INSTRUCTIONS : the recorded owner at time of foaling is responsible for registration of the foal and must have current membership in order to register.

(1) CODE 6101		(2) BREED CODE 367		(3) SEX (Female = 1, Male = 2)		2		() Stallion		() Mare		() Gelding		() Spayed mare	
(4) BREEDER'S PREFIX: Blue Sky				(4.5) NAME (First choice) Freaky Friday											
		DATE		(6) BIRTH STATUS		1		NAME (Second Choice)							
		D M Y		Single = 1 Twin = 2											
(5) SERVICE CODE		10 11 24		(8) Section of herdbook				IF THIS FOAL HAS CHANGED HANDS PRIOR TO REGISTRATION ATTACH A COMPLETED, SIGNED TRANSFER REPORT							
Natural = 1				(9) Subsection of herdbook				BREEDER: (owner of dam at time of service.) Anri Roux							
Artificial Insemination = 2				(11 a) DO				TOWN & PROVINCE: Bothaville, FS							
Embryo Transfer = 3				(11 b) NUMBER											
(10) FOALING DATE		22 10 25													
(12) SIRE NAME: Sandymount Stormy Cat				(13) REGISTRATION NUMBER: 13227582											
OWNER OF SIRE: Anri Roux				TOWN & PROVINCE: Bothaville, FS											
(14) DAM NAME: Blue Sky Dunit Emma				(15) REGISTRATION NUMBER: 13261979											
OWNER OF DAM: Anri Roux				TOWN & PROVINCE: Bothaville, FS											
(16) SASSA BREEDER NO.:				(17) REGISTRATION DATE:											
(26) COLOUR MARKINGS (CHECK ONE)															
() SORREL		() BLACK		() PALOMINO		() BAY		() RED ROAN		() GRAY		(X) CHESTNUT			
() BUCKSKIN		() BROWN		() RED DUN		() DUN		() BLUE ROAN		() GRULLO					
BREEDER'S CERTIFICATE : (to be completed if the sire and dam where not owned by the same entity at the time of service or dam at time of foaling.)															
THIS IS TO CERTIFY (Stallion's name)															
WAS BRED TO (Mare served)															
ON (list dates mare was by Date/s															
Signature (owner of stallion):															
Signature (owner of mare):															
NB: Complete marking diagrams and blanks.															

As recorded owner of the dam at the time this horse was foaled (or authorised agent) I declare that the pedigree, breeding particulars and identification marks of the animal described herein are correct, and that all the requirements of the Constitution and the Act relating to birth notifications and applications for registrations have been complied with.

Signature: 

Postal address: 23 Botha Street, Bothaville

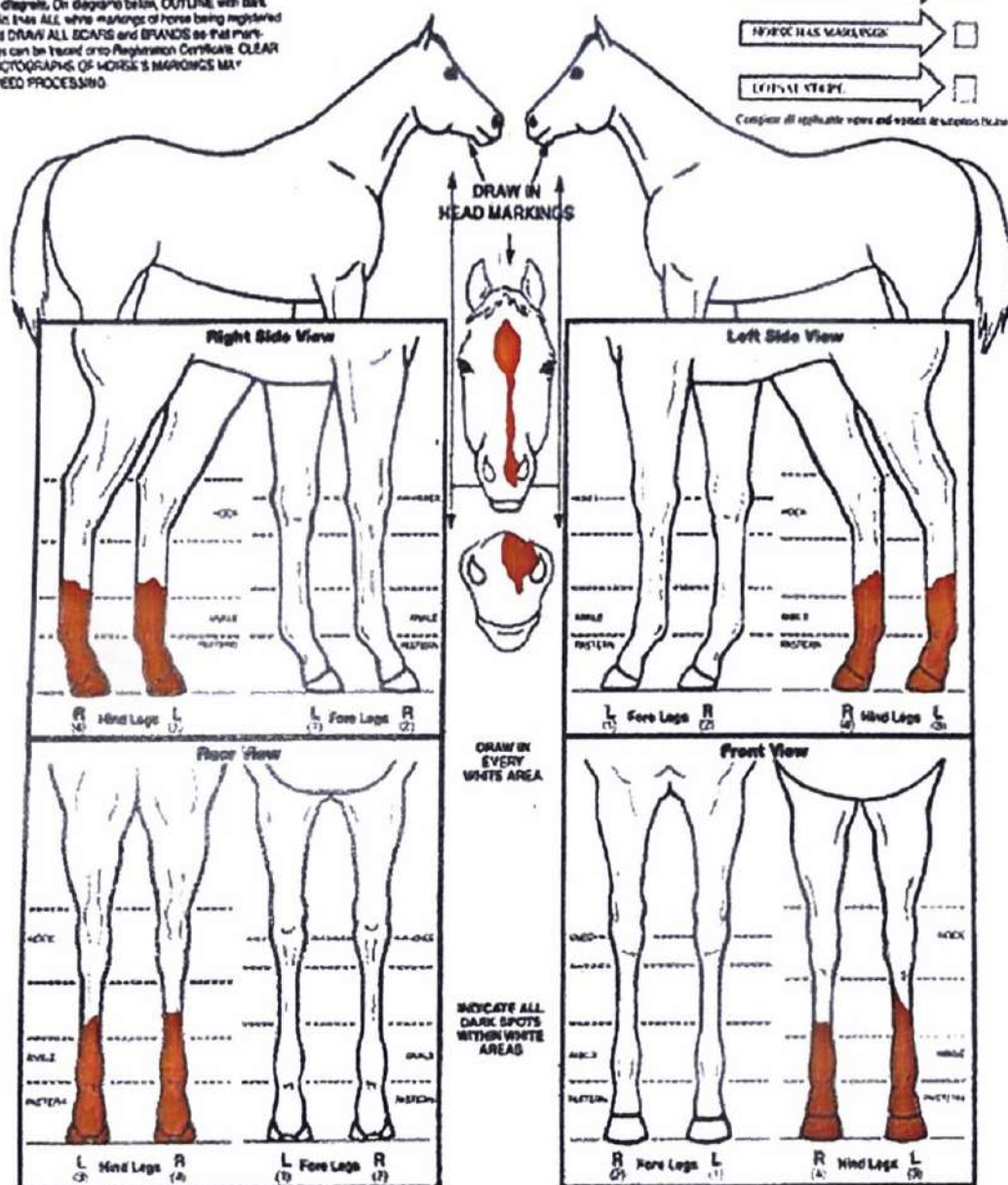
9660, FS

Tel. No. 082 578 5690

Markings on sides of head and often must be drawn in detail. On diagram below, OUTLINE with dark ink. Use ALL white markings of horse being registered and DRAW ALL SCARS and BRANDS as they may appear on horse's head. CLEAR PHOTOGRAPHS OF HORSE'S MARKINGS MAY SPEED PROCESSING.

HORSE HAS NO MARKINGS ☐
HORSE HAS MARKINGS ☐
LOOSELY MARKED ☐

Complete all applicable notes and remarks in separate column



WRITTEN DESCRIPTION OF MARKINGS:

HEAD White Blaze COLOR OF EYES Black

(1) LEFT FORE LEG None

(2) RIGHT FORE LEG None

(3) LEFT HIND LEG White Sock

(4) RIGHT HIND LEG White Sock

OTHER OR UNUSUAL MARKINGS OR COLOR None

COLOR OF MANE AND TAIL Chestnut

SCARS AND BRANDS None If branded, check if freeze brand ☐