



Saddlebred Society of SA Saalperdgenootskap van SA

TRANSFER REQUEST

I. AJvRooyen hereby request the transfer of the following horse/s:

1.

HORSE REGISTERED NAME: Miss Harris

Reg. No. (H057/26)? Transfer date: 17/06/2026

TO: Frans Johannes Geber (Name & Surname / Comany)

ADDRESS Loteliestraat 39; Riversdal, 6670

EMAIL geber.frans02@gmail.com CELL NR 076 848 5633

2.

HORSE REGISTERED NAME: _____

Reg. No. _____ Transfer date: ____/____/____

TO: _____ (Name & Surname / Comany)

ADDRESS _____

EMAIL _____ CELL NR _____

3.

HORSE REGISTERED NAME: _____

Reg. No. _____ Transfer date: ____/____/____

TO: _____ (Name & Surname / Comany)

ADDRESS _____

EMAIL _____ CELL NR _____

Payment will be made by: /____/ Myself Or /____/ New Owner/s

AJvRooyen
SIGNATURE
REGISTERED OWNER OF HORSE

Or

SIGNATURE
ACCOUNTABLE PERSON ADMIN / TRAINER

AJvRooyen
Name

Name

Today's date: ____/____/____