

Subject: FW: Blue Sky - Registration Applications 2
From: <secretary@saqha.co.za>
Date: 2026/07/10, 08:52 am
To: "'Talisha Maas'" <talisha@studbook.co.za>

Hi Talisha

Sien asseblief aangehegde registrasie vorms.

From: Anri Roux <anriroux158@gmail.com>
Sent: Wednesday, June 24, 2026 10:13 PM
To: secretary@saqha.co.za
Subject: Blue Sky - Registration Applications 2

Please find attached application for the following horses.

- Blue Sky Mr Big
- Blue Sky American Badger
- Blue Sky American Made
- Blue Sky Eternal Grace

Plus a Stallion Breeding Report for Light Americat.

Kind regards

— Attachments: —

Stallion Breeding Report - Light Americat 2026 .pdf	587 KB
Registration Application - Blue Sky Mr Big .pdf	1.2 MB
Registration Application - Blue Sky American Made .pdf	1.2 MB
Registration Application - Blue Sky Eternal Grace .pdf	1.2 MB

INSTRUCTIONS: the recorded owner at time

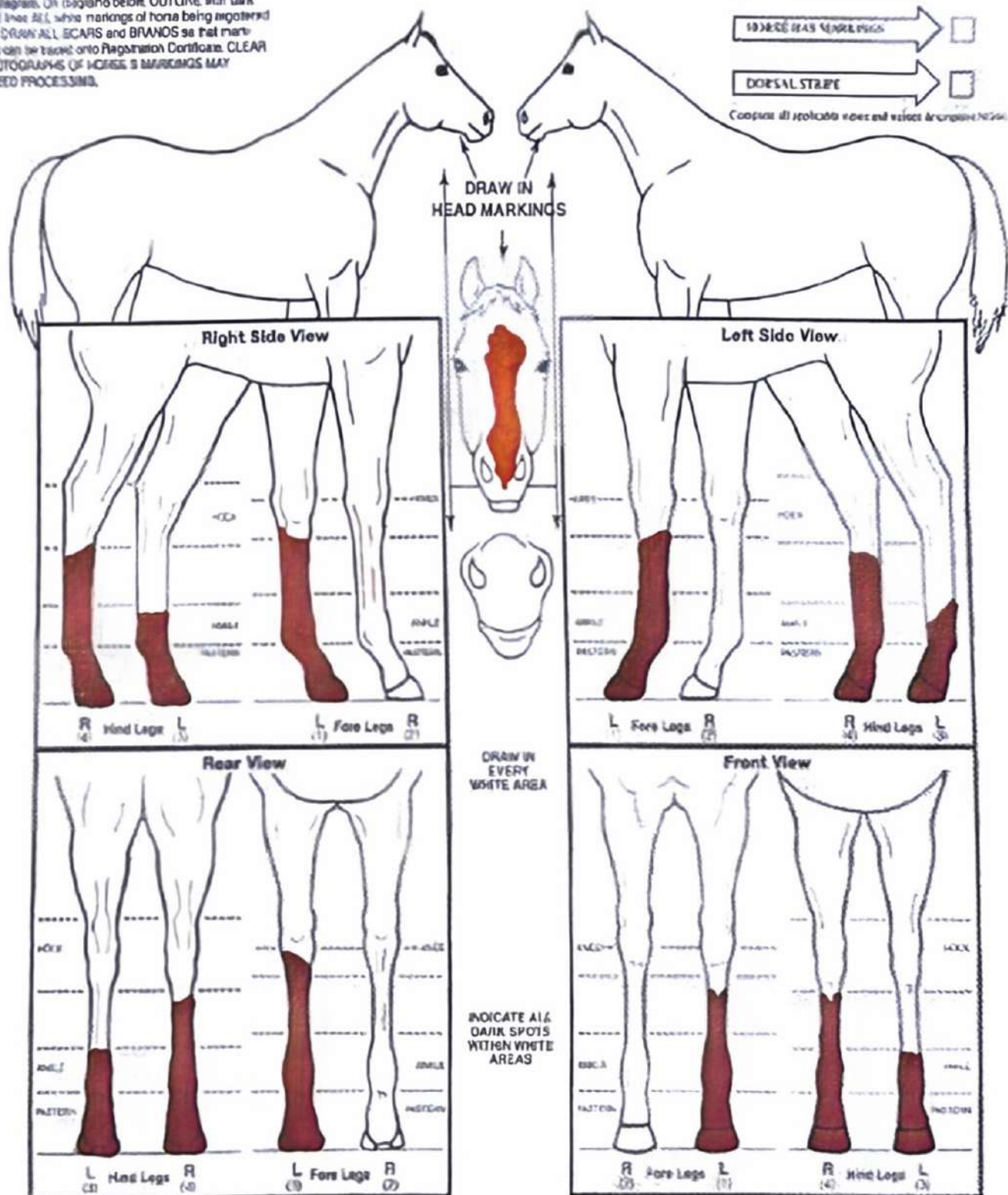
In order to register,

NB: Complete marking diagrams and blanks.

Markings on sides of head and chin must be drawn on diagram. On diagram below, OUTLINE with dark ink. On sides of head, white markings of horse being registered and DRAW ALL SCARS AND BRANDS so that markings can be traced onto Registration Certificate. CLEAR PHOTOGRAPHS OF HORSE'S MARKINGS MAY SPEED PROCESSING.

HORSE HAS NO MARKINGS ☐
HORSE HAS MARKINGS ☐
DORSAL STRIPE ☐

Complete all applicable views and views description.



WRITTEN DESCRIPTION OF MARKINGS:

HEAD: White Blaze COLOR OF EYES: Black

(1) LEFT FORE LEG: White Stocking

(2) RIGHT FORE LEG: None

(3) LEFT HIND LEG: White Sock

(4) RIGHT HIND LEG: White Stocking

OTHER OR UNUSUAL MARKINGS OR COLOR: None

COLOR OF MANE AND TAIL: Chestnut

SCARS AND BRANDS: None If branded, check & if proper brand ☐

REGISTRATION APPLICATION

THE SOUTH AFRICAN QUARTER HORSE ASSOCIATION
P.O. BOX 32133, Fichardpark, Bloemfontein, 9317 TEL: 071 471 3684 FAX: 086 2 the foal and must have current membership

INSTRUCTIONS : the recorded owner at time of foaling is responsible for registration in order to register.

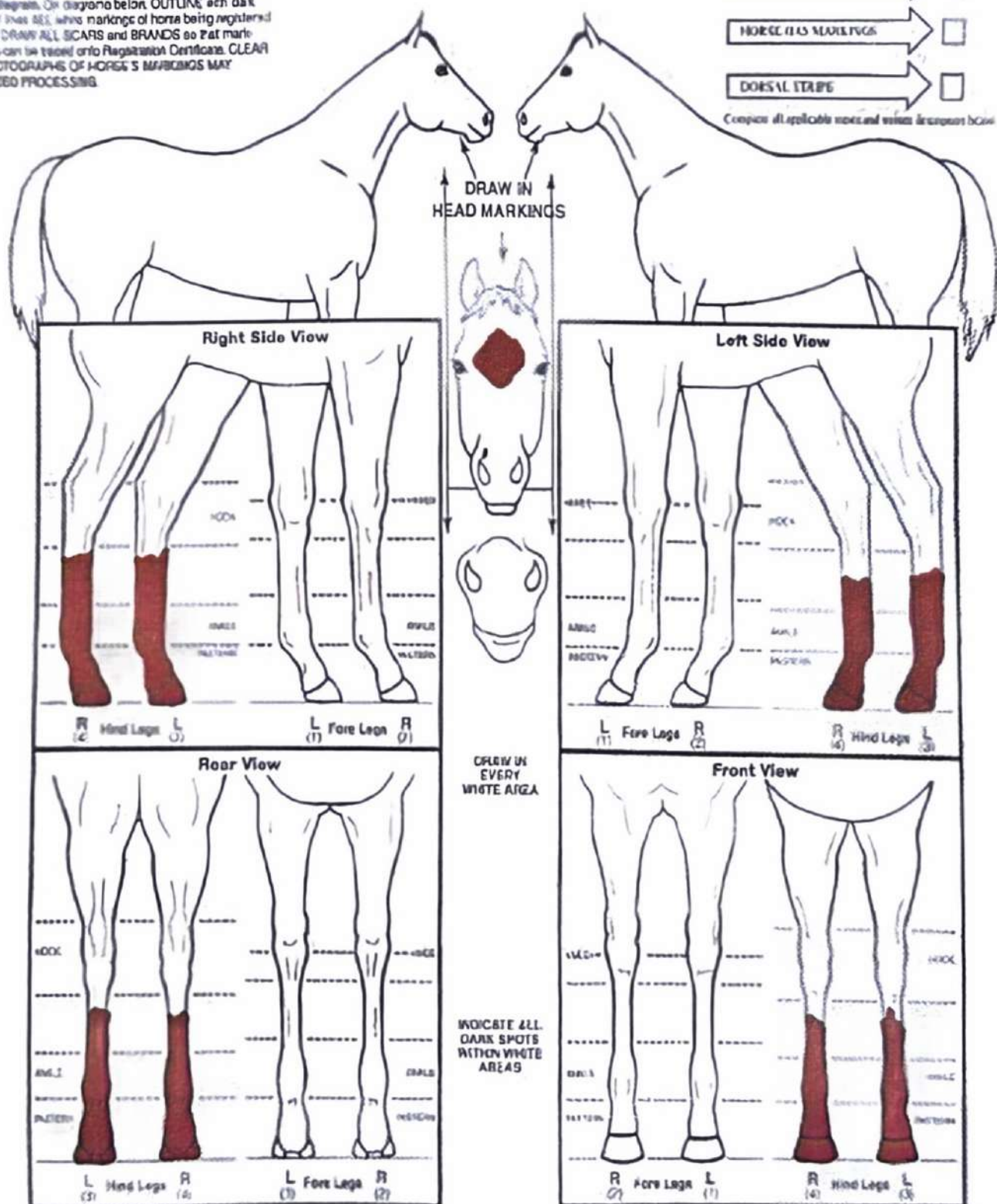
(1) CODE 6101		(2) BREED CODE 367		(3) SEX (Female = 1, Male = 2)		2		() Stallion		() Mare		() Gelding		() Spayed mare	
(4) BREEDER'S PREFIX:				Blue Sky				(4.5) NAME (First choice)							
								American Made							
		DATE		(6) BIRTH STATUS		1		NAME (Second Choice)							
				Single = 1 Twin = 2											
(5) SERVICE CODE		20 01 25		(8) Section of handbook				IF THIS FOAL HAS CHANGED HANDS PRIOR TO REGISTRATION ATTACH A COMPLETED, SIGNED TRANSFER REPORT							
Natural = 1				(9) Subsection of handbook				BREEDER: (owner of dam at time of service.)							
Artificial Insemination = 2				(11 a) DQ				Anri Roux							
Embryo Transfer = 3				(11 b) NUMBER				TOWN & PROVINCE: Bothaville, FS							
(10) FOALING DATE		26 12 25						REGISTRATION NUMBER: 12940987							
(12) SIRE NAME:		Light American						TOWN & PROVINCE: Bothaville, FS							
OWNER OF SIRE:		Anri Roux						TOWN & PROVINCE: Bothaville, FS							
(at time of service)								REGISTRATION NUMBER: 13231402							
(14) DAM NAME:		Calcrete Luyt Lene						TOWN & PROVINCE: Bothaville, FS							
OWNER OF DAM:		Anri Roux						TOWN & PROVINCE: Bothaville, FS							
(at time of foaling)								REGISTRATION DATE:							
(16) SASSA BREEDER NO.:								(17) REGISTRATION DATE:							
(26) COLOUR MARKINGS (CHECK ONE)								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.							
() 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 bled)		Date/s													
Signature (owner of stallion):															
Signature (owner of mare):															
Signature (owner of mare):															

NB: Complete marking diagrams and blanks.

Postal address: 23 Botha Street, Bothaville
9660, FS
Tel. No. 082 578 5600

Markings on sides of head and chin must be drawn as diagram. On diagram below, OUTLINE each dark solid line ALL white markings of horse being registered and DRAW ALL SCARS and BRANDS so that markings can be traced onto Registration Certificate. CLEAR PHOTOGRAPHS OF HORSE'S MARKINGS MAY SPEED PROCESSING.

☐ FRONT FEET NO MARKINGS
☐ HORSE HAS MARKINGS
☐ DORSAL STRIPE
 Complete all applicable notes and return description below



WRITTEN DESCRIPTION OF MARKINGS:

HEAD White Star 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 ☐

REGISTRATION APPLICATION

THE SOUTH AFRICAN QUARTER HORSE ASSOCIATION
P.O. BOX 32133, Fichardpark, Bloemfontein, 9317 TEL: 071 471 3684 FAX: 086 24 the foal and must have current membership in order to register.

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

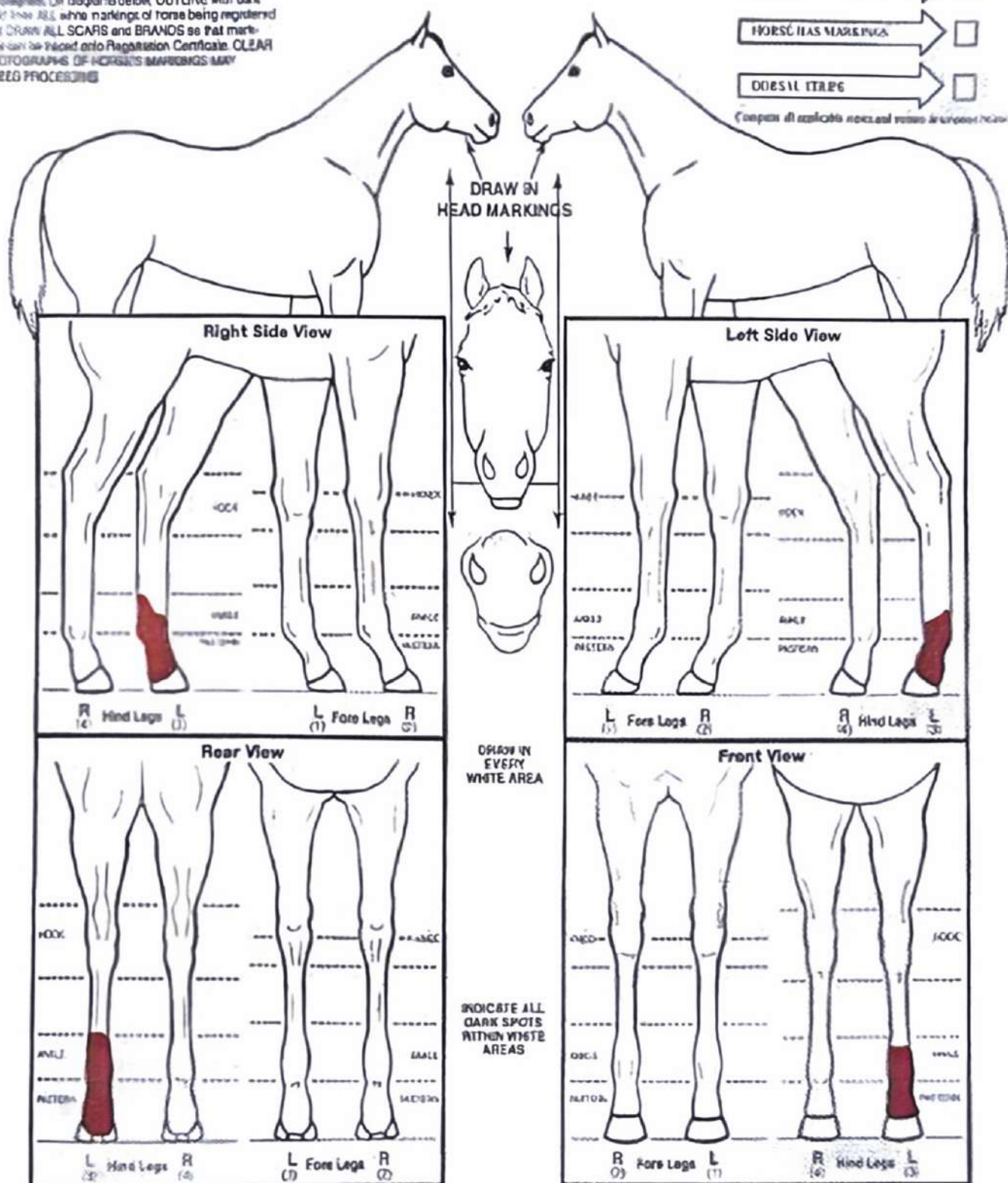
(1) CODE 6101	(2) BREED CODE 367	(3) SEX (Female = 1, Male = 2)	1	() Stallion	(X) Mare	() Gelding	() Spayed mare
(4) BREEDER'S PREFIX: Blue Sky		(4.5) NAME (First choice) Eternal Grace					
DATE D M Y		(6) BIRTH STATUS Single = 1 Twin = 2	NAME (Second Choice)				
(5) SERVICE CODE Natural = 1 21 02 25		(8) Section of herdbook	IF THIS FOAL HAS CHANGED HANDS PRIOR TO REGISTRATION ATTACH A COMPLETED, SIGNED TRANSFER REPORT				
Artificial Insemination = 2		(9) Subsection of herdbook	BREEDER: (owner of dam at time of service)				
Embryo Transfer = 3		(11 a) DO	TOWN & PROVINCE				
(10) FOALING DATE 23 01 26		(11 b) NUMBER					
(12) SIRE NAME: OWNER OF SIRE : (at time of service) Anri Roux		SACHA MEM NO. : 0714029	TOWN & PROVINCE Bothaville, FS		(13) REGISTRATION NUMBER: 12940987		
(14) DAM NAME: OWNER OF DAM : (at time of foaling) Calerele Silver Waltz		SACHA MEM NO. : 0714029	TOWN & PROVINCE Bothaville, FS		(15) REGISTRATION NUMBER: 12785846		
(16) SASBA BREEDER NO. :		(17) REGISTRATION DATE :		(21) PREFIX INDICATOR			
(26) COLOUR MARKINGS (CHECK ONE)		() BLACK		(X) PALOMINO	() BAY	() RED ROAN	() GRAY
() SORREL		() BROWN	() RED DUN	() DUN	() BLUE ROAN	() CREMELLO	() CHESTNUT
() BUCKSKIN		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)		Reg No.					
WAS BRED TO (Mare served)		Reg No.					
ON (list dates mare was b		Date/s					
Signature (owner of stallion)		Mem. No.					
Signature (owner of mare)		Mem. No.					
Postal address: 73 Botha Street Bothaville, 9660		Tel. No. 053 971 7981					

NB: Complete marking diagrams and blanks.

Markings on sides of head and chin must be drawn on diagram. On diagram below, OUTLINE with dark ink and ALL white markings of horse being registered and DRAW ALL SCARS and BRANDS so that markings can be placed onto Registration Certificate. CLEAR PHOTOGRAPHS OF HORSE'S MARKINGS MAY SPEED PROCESSING

HORSE HAS NO MARKINGS ☐
 HORSE HAS MARKINGS ☐
 OTHER USES ☐

Complete all applicable items and return to nearest office



WRITTEN DESCRIPTION OF MARKINGS:

HEAD: None COLOR OF EYES: Black

(1) LEFT FORE LEG: None

(2) RIGHT FORE LEG: None

(3) LEFT HIND LEG: White Sock

(4) RIGHT HIND LEG: None

OTHER OR UNUSUAL MARKINGS OR COLORS: None

COLOR OF MANE AND TAIL: White

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