PAINT HORSE ASSOCIATION OF AUSTRALIA

Paint Horse Association of Australia Ltd
PO Box 1008, Dubbo NSW 2830
Phone: 02 6884 5513
Email: office@painthorse.net.au
ABN: 43 003 155 691

QUARTER HORSE / THOROUGHBRED MARE LISTING FORM

FEE $60

I hereby make application to have my Quarter Horse / Thoroughbred mare (Circle one) listed by the PHAA to enable her progeny to be registered with the Association.

A photocopy (front and back) of the horse's current registration certificate must accompany application.

AQHA and ASB mares listed with the PHAA must be upgraded with DNA Parent Validation on file with the association with which they are registered.

NAME OF HORSE: ……

REG NO. / ASB Vol & Page No: .....

DNA/PARENT VALIDATION STATUS: YES NO
(Please indicate by circling appropriate status)

HYPP STATUS: N/N N/H H/H UNKNOWN
(Please indicate by circling appropriate status)

OWNER: …… MEMB No: ……

ADDRESS:..... TOWN: ……

STATE: …… POSTCODE: ……..

TELEPHONE: ……MOBILE: ……..

EMAIL:……..

SIGNATURE: ……DATE: ……../……../……..

If any mare is **leased**, the certificate of recording/registration for the mare and an official lease form must be forwarded to this office together with the appropriate lease fee and it is essential that the period of the lease be stipulated. If the mare to be listed is in foal please state the name of the stallion who sired the foal.

Any progeny of horses known to be carrying the **HYPP** gene MUST be tested for HYPP prior to being considered for registration. Progeny shown to be H/H or N/H will not be eligible for registration with the PHAA. Refer PHAA rule 113.

For rules regarding Artificial Insemination and Embryo Transfer please refer to the PHAA rule book.

☐ *I/we have paid $..... for above fees by direct deposit - **Date of deposit*** __ __ / __ __ / __ __ __ __

BSB: 062 534 A/C No: 1025 3938 A/C Name: Paint Horse Association of Aust.

☐ I/We enclose cheque / money order / credit card details for $**.....** for above fees.

Credit Card Payments

VISA / MASTERCARD (Please Circle) *Card No* __ __ __ __ /_ __ __ __ __ /__ __ __ __ / __ __ __ __

Name on Card ……..……. *Expiry Date _ _ / _ _*

Signature: ……..……. *Date:.....*