



ANDALUSIAN HORSE ASSOCIATION OF AUSTRALASIA (Inc.)
P.O. Box 266, Torquay, Vic. 3228

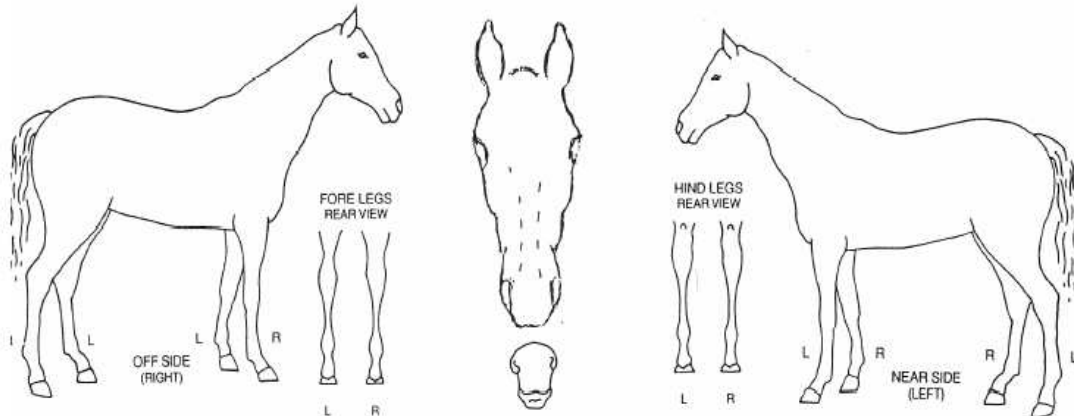


RECORDING DATE	REGISTERED NUMBER
Office Use Only	

Application for Registration of Foal

NAME OF FOAL (two or three in order of preference)		FOALING DATE	SEX	COLOUR
SIRE OF FOAL:		REG. NO.	CLASSIFICATION **	
DAM OF FOAL:		REG. NO.		

(** indicates whether foal is 1st cross, 2nd cross, Australian, PSP or Spanish Andalusian)



Full description of markings

White markings shown in black

Brands

Head

Body

Forelegs {Near side
{Off side

Hindlegs {Near side
{Off side

Acquired markings

BRANDING DETAILS (if applicable)
I certify that I have branded the above described horse this day of, 2..... and that all particulars described hereon are true and correct.
Signed: Dated:

PLEASE USE BLOCK LETTERS

Name(s) in full of Owner or Part Owner	Residential Address of each Part Owner
.....
Name and address of Breeder (the owner of the mare at the time of foaling)	
.....	

Signature of Owner or Part Owner: Date:

FEE FOR REGISTRATION MUST BE FORWARDED WITH THIS APPLICATION