

ApHC UK Ltd

REGISTRATION APPLICATION

Applications must be filled in completed and signed except in the case of ApHC registered horses where the Breeder's Certificate and Stallion Owner's Certificate may be left blank. Applications for ApHC (USA) registered horses must be accompanied by a photocopy of both sides of the ApHC Registration Certificate.

Please submit **six current photographs**: Front, two of each side and rear view, to show all white markings clearly, and send paperwork, photos and cheque payable to ApHC UK Ltd. We recommend that you send all valuable paperwork via **Recorded Delivery** to the address below.

STALLION	<input type="checkbox"/>	SECTION A	<input type="checkbox"/>
MARE	<input type="checkbox"/>	SECTION B	<input type="checkbox"/>
GELDING	<input type="checkbox"/>	PART-BRED	<input type="checkbox"/>
		NON-APPALOOSA	<input type="checkbox"/>

IMPORTANT: PLEASE CHECK THAT THE STALLION OWNER HAS FILED A STALLION BREEDING REPORT FORM. WITHOUT THIS INFORMATION ON FILE REGISTRATION WILL BE REFUSED.

OFFICE USE:

STALLION BREEDING REPORT FORM FILED

ApHC USA International Affiliate

Reg Number
 Fee Paid
 Date
 Member No:



REGISTRATION COSTS

Registration with passport **MEMBER** £20 – 0 to 6 months old
 Registration with passport **NON-MEMBER** £40 – 0 to 6 months old
 Registration with passport **MEMBER** £45 – over 6 months old
 Registration with passport **NON-MEMBER** £65 – over 6 months old

NOTE: All Registrations have to be in by 30th November or 6 months whichever is later.

YOUR CHECKLIST

<input type="checkbox"/>	COPY OF PSSM STATUS REPORT
<input type="checkbox"/>	6 CURRENT PHOTOGRAPHS
<input type="checkbox"/>	FEES - PAYABLE TO 'ApHC UK'
<input type="checkbox"/>	2nd PAGE FILLED IN BY VET

PRINT NAME CHOICE IN ORDER OF PREFERENCE - MAX. 20 LETTERS INCLUDING SPACES

1.		2.		
COLOUR	FOALING LOCATION	FOALING DATE	DATE OF IMPORTATION IF APPLICABLE	ApHC/BapS No IF APPLICABLE

PEDIGREE

SIRE's DETAILS

NAME
 REG. No:
 BREED:

SIRE'S SIRE (GRANDSIRE)	SIRE'S DAM (GRANDDAM)
NAME	NAME
REG. No:	REG. No:
BREED:	BREED:

DAM's DETAILS

NAME
 REG. No:
 BREED:

DAM'S SIRE (GRANDSIRE)	DAM'S DAM (GRANDDAM)
NAME	NAME
REG. No:	REG. No:
BREED:	BREED:

BREEDER'S CERTIFICATE: (ANY ALTERATIONS OR ERASURES MAY VOID THIS BREEDER'S CERTIFICATE)

SERVICE DATES: _____ YEAR _____

Natural (hand) service Artificial insemination Transported semen Frozen semen Pasture breeding Embryo transfer

This is to certify that the stallion _____ Registration # _____
 bred the mare _____ Registration # _____

***OWNER OF DAM AT TIME OF BREEDING: (Please print as it appears on the dam's Certificate of Registration.)**

NAME	ApHC UK Membership No	PHONE #/S	DAY:
ADDRESS	TOWN/CITY	COUNTY	NIGHT:
			POSTCODE

Signature Required _____ Date _____

OWNER'S CERTIFICATE

Owner of animal for which registration is required

Address

Contact Phone No: E-Mail Address:

ApHC UK Ltd Membership No:

I certify that I will regard all decisions made by the Directors of the ApHC UK Ltd as binding and final according to the rules of the ApHC UK Ltd. I confirm that no other passport has been applied for or issued to this horse or I attach this horse's passport and request registration.

Signature Date Cheque Enclosed for

PLEASE RETURN COMPLETED FORM, PAPERWORK AND FEES TO:
 Auriol Thorne, 2A Dryden Way, Liphook, Hampshire, GU30 7QB.
 Tel: 07827 858 120 Email: registrations@aphecuk.org

PLEASE ENSURE YOUR VET COMPLETES AND SIGNS THE ATTACHED DIAGRAM AND DESCRIPTION FORM ACCURATELY AS THIS WILL BECOME PART OF THE HORSE'S PASSPORT

A: ANIMAL IDENTIFICATION TO BE COMPLETED BY A VETERINARY SURGEON

(12) Right side
Côté droit

TRANSPONDER

(13) Left side
Côté gauche

(14) Upper eye level
Ligne supérieure des yeux

(15) Fore
Rear view
Antérieurs Vue postérieure

(16) Neck
Lower view
Encolure
Vue inférieure

(17) Muzzle
Nez

(18) Hind
Rear view
Postérieurs
Vue postérieure

Left Gauche Right Droit

Signature and stamp of the veterinarian or qualified person or competent authority (name in capital letters)/
Signature et cachet du vétérinaire ou de la personne qualifiée ou de l'autorité compétence (nom en lettres capitales)

MICROCHIP NUMBER:

Pursuant to Commission Regulation (EC) 262/2015 I can confirm that I read the microchip for the animal identified on this application and it was:

Previously implanted Implanted today (tick one)

PLEASE AFFIX BARCODE STICKER HERE

It is a statutory requirement that a qualified veterinary surgeon and member of the Royal College of Veterinary Surgeons (RCVS) verifies the identification section above. The same veterinary surgeon is responsible for the completion of the written description which can be found in section E of this application.

B: ANIMAL DETAILS

ANIMAL NAME:

COLOUR: SEX:

DATE OF BIRTH: COUNTRY OF BIRTH:

PLACE OF BIRTH:

SPECIES: **D: CHESTNUTS** FOR HORSES WITHOUT MARKINGS & LESS THAN THREE WHORLS

C: SIRE AND DAM IF KNOWN

SIRE - UELN:

SIRE - NAME:

DAM - UELN:

DAM - NAME:

FORELEG LEFT	FORELEG RIGHT
HINDLEG LEFT	HINDLEG RIGHT

FOR OFFICE USE ONLY

Please continue onto the next page.

ANIMAL IDENTIFICATION (continued)

ANIMAL NAME:

Grid for animal name

E: ANIMAL DESCRIPTION

HEAD:

Grid for head description

FORELEG L:

Grid for foreleg left description

FORELEG R:

Grid for foreleg right description

HINDLEG L:

Grid for hindleg left description

HINDLEG R:

Grid for hindleg right description

BODY:

Grid for body description

MARKINGS:

Grid for markings description

F: OFFICIAL SIGNATURE AND STAMP

SIGNATURE OF QUALIFIED PERSON (NAME IN CAPITAL LETTERS):

STAMP OF ISSUING BODY OR COMPETENT AUTHORITY:

Signature box with date of examination sub-form

Stamp box

DATE OF EXAMINATION:

DD / MM / YYYY date grid