



SOUTH AFRICAN WARBLOOD HORSE SOCIETY
 PO BOX 32847 KYALAMI 1684 SOUTH AFRICA TEL (+27) (0) 83 260 6495
 E – MAIL sawhs@mweb.co.za WEBSITE www.sawarmbloodhorses.com

RECORDING APPLICATION FORM

MEMBER NO. NAME OF HORSE:

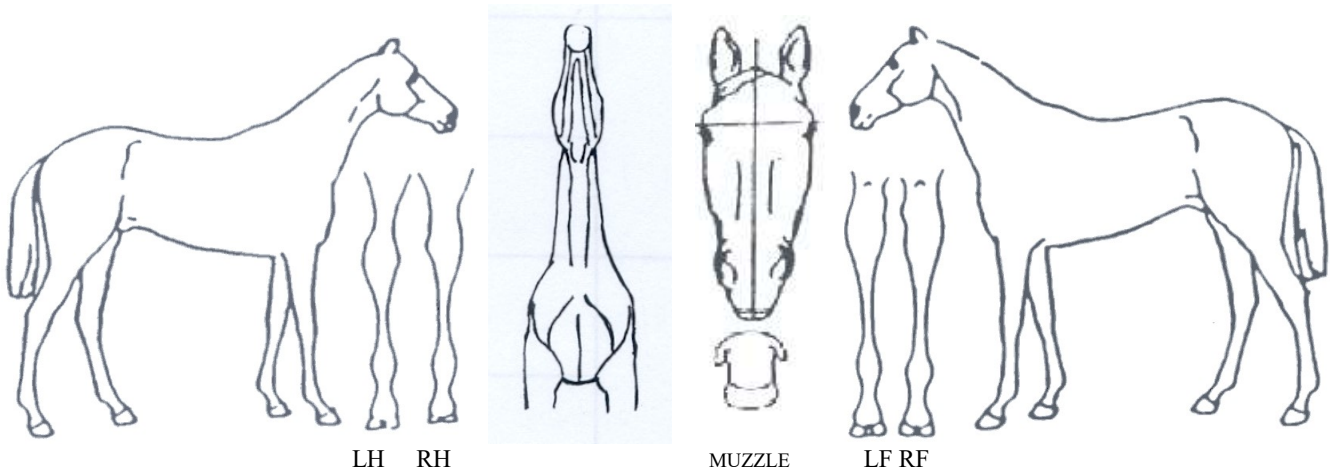
OWNER TELEPHONE NO:

ADDRESS:

GENDER

HEIGHT:

COLOUR:



Indicate all whorls by means of a cross, show white markings in red.

DECLARATION

I declare that I am the owner/ have bred the animal described here and that the breeding details and identification marks are correct and I agree to honour and submit myself to the Regulations of the South African Warmblood Horse Society.

Signature of Breeder/ Owner Date

I hereby certify that I have sold the horse described on this application to the owner as recorded above.

Name of previous Owner Date

Signature





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BRED BY:.....

NAME OF HORSE:

TELEPHONE NUMBER:

ADDRESS:

NAME	SIRE			
	Reg. No.			
GENDER				
DATE OF BIRTH	DAM			
	Reg. No.			
COLOUR				

DNA Tested: YES DNA Number:

DNA Tested: NO Hair Sample received:..... Date:

Sample sent to Onderstepoort:Date:.....

Official use only: Payment received:

Checked and found in order
Secretary's signature Date

INSPECTION

Passed for Registration Passed for Recording

Signature of Inspector Remarks

Date inspected



Registered Breed Society – 62/98/B-50

