

PO Box 5620,
 Canning Vale South, WA 6155
 Email: secretary@afwhs.com.au
 ARN: 166 952 478
 IARN: A1015671D



APPLICATION FOR PEDIGREE CERTIFICATE

DETAILS OF OWNER/APPLICANT		
Name:	AFWHS Member No.:	
Address:	State:	P/C:
Email:	Phone:	

DETAILS OF HORSE			
AFWHS Registered		AFWHS Registration No:	
Breeders Name:		Breeders Stud:	
Sex (please circle):	Female Male (entire) Male (gelded)	Stud Location:	
Colour:		Friesian Breeding (%):	

PEDIGREE INFORMATION <i>(Please enter horses pedigree information as it will appear on the certificate— also indicate if unknown)</i>			
	Sire:	Reg:	Sire:
	Breed:	DOB:	Dam:
Sire:	Reg:	Dam:	Reg:
Breed:	DOB:	Breed:	DOB:
Dam:	Reg:	Sire:	Reg:
Breed:	DOB:	Breed:	DOB:
	Dam:	Reg:	Sire:
	Breed:	DOB:	Dam:

CONDITIONS:
<ul style="list-style-type: none"> * This form is ONLY for horses registered with AFWHS Inc. This form may also accompany a new Application for Registration. * You, as the Owner/Applicant, must be a current financial member of the AFWHS Inc to request a Pedigree Certificate for your horse. * ONE PHOTO (must be side on, showing the full body with face showing where possible) must accompany this form, and this photo will appear on your Pedigree Certificate. Electronic applications with photo are preferred for this reason, although they may also be posted to the Society's address above. * Please note that if you wish for your horses entire pedigree to appear on your certificate then you must complete <u>ALL</u> the details on the form; include as much detail as possible as this will appear on the Pedigree Certificate. * Please note that failure to complete the form accurately, which results in errors (due to inaccurate or incomplete information being supplied on the form) will incur a fee of \$10 for a replacement Pedigree Certificate. By signing below, you confirm that you have reviewed the details of this application and take responsibility for it's accuracy.
Signed (Owner): _____ Date: _____

PAYMENT DETAILS-	PEDIGREE CERTIFICATE FEE—\$10.00
Method of Payment: <input type="checkbox"/> Cheque or Money Order made payable to AFWHS Inc (post to address listed at top left of form) (please tick) <input type="checkbox"/> Direct Deposit (bank details below— please include your surname as reference— complete the details below and attach a	
Account Name: AUSTRALIAN FRIESIAN WARMBLOOD HORSE SOCIETY INC	

Date of Deposit:	Reference Used:	Copy of Receipt Attached:
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OFFICE USE ONLY		
Date Received:	Paid on: by: Chq MO Direct	Receipt # Issued: