APPLICATION FOR REGISTRATION
CANADIAN MORGAN HORSE ASSOCIATION, INC.

MAIL TO: CANADIAN LIVESTOCK RECORDS CORPORATION, 2417 HOLLY LANE, OTTAWA, ON K1V 0M7

☐ PUREBRED ☐ PART-BRED

ALL SIGNATURES MUST BE IN INK. **COMPLETE BOTH SIDES OF APPLICATION** AND SUBMIT WITH FEES PAYABLE TO CANADIAN LIVESTOCK RECORDS. IF ANIMAL SOLD, ATTACH APPLICATION FOR TRANSFER OF OWNERSHIP.

TO AVOID UNNECESSARY DELAY, PLEASE CHECK FOR ERRORS AND OMISSIONS BEFORE SUBMITTING IT.

Check if animal was produced as a result of:

☐ Pasture Breeding ☐ Hand Breeding ☐ Artificial Insemination ☐ Embryo Transplant

Check when used: ☐ Fresh Cooled Semen ☐ Frozen Semen

For embryo transfers, attach embryo transfer documentation or Embryo Certificate.

NAME OF ANIMAL (NOT MORE THAN 25 LETTERS INCLUDING SPACES AND PUNCTUATION. PLEASE LIST MORE THAN ONE CHOICE BELOW.

First Choice:																									
Second Choice:																									
Third Choice:																									

SEX (check appropriate box) ☐ **Male** ☐ **Female** ☐ **Gelding**

Castration Date, if gelded **Day** | **Month** | **Year**

SEX OF TWIN, IF ANY (check appropriate box) ☐ **Male** ☐ **Female** ☐ **Gelding**

Date of Birth **Day** | **Month** | **Year**

Name of Sire | Canadian No. | American No.

Name of Dam | Canadian No. | American No.

Name and Address of Breeder (owner or lessee of dam at time of conception of above described animal) | ID. No.

Name and Address of Owner at Birth (owner or lessee of dam when she gave birth to above described animal) | ID. No.

Name and Address of Importer | Date on which Importer purchased animal (Day | Month | Year) | ID. No.

I declare that the information here is to the best of my knowledge and belief true.

Signature of owner at birth or importer

X

Date signed (Day | Month | Year)

Address of Applicant

Telephone # (_____) _____ E-Mail Address _____

CERTIFICATE OF SERVICE (fill in below or attach service report unless service already recorded on dam's certificate)

I hereby declare that the above named dam was served by the above named sire on (Day | Month | Year)

OR the above named dam was exposed to the above named sire **FROM** (Day | Month | Year)

TO (Day | Month | Year)

Signature of Sire Owner at time of breeding

X

ID. No.

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