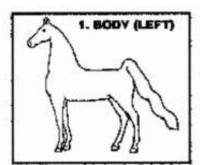


APPLICATION FOR REGISTRATION

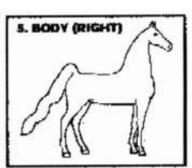
CLRC 2417 Holly Lane Ottawa, ON K1V 0M7 Tel. 613-731-7110 Fax 613-731-0704

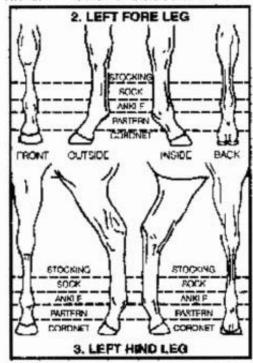
×																
	Sig	gnatur	e of pe	rson pre	paring a	applica	ition				Daytin	ne Pho	ne Nun	nber		(72-1-1-72-1-1
Check	if foal	is the	result of	Embryo T	ransplar	nt	Che	ck if foal	is resu	alt of A	rtificia	l Insen	nination	1		✓ Purebred ✓ Part-bred
ame (Ma)	ximu	n of 3	0 chara	cters inc	luding	space	s and p	unctuatio	on)							
		Т		\top	T	Т			Т			П	Т	Т	Т	
		1				_				_	_		_	_		
														lonth/\	Year	
Sex of Ho	orse	1	Mare	_ St	allion_	-	Gelding	9	If ge	lding,	date a	altered	/	1	┙	
Colori	-			_		-	-		Cr	nestnu	it, Bay	, Black	, Pinto,	specif	fy othe	er.
Color:	_		_				_		I							
Name of	Dam	Owne	er at tim	e of foal	ing											
					_											
ate foaled		1	1													
ato rouses	Da	ay/ Mo	nth/ Ye	ar (Al	L FOAL	.S must	be qual	lified by DI	NA as t	he offs	pring o	f the sin	e and da	m. DN	IA kit \$	570.00 per kit.
ire of the F	oal											istration	#			
								If not DNA	please	order ki	it					
am of Foal												istration	n#			
		22						If not DN	A, pleas	e order	kit					
ocation of D	Dam a	it time	of foaling	g: Provinc	e											
															_	
)wner o	of Fo	oal (1	The orio	inal own	er(s) of	f a foal	is the	owner(s)	of the	dam a	at the	time th	e foal is	s born)	
Name		, , , , , , , , , , , , , , , , , , ,	110 0119		0.(0)		10 1110	ID	2/15		\neg	Phone				
	_											_			7	
Address									_	_		_			_	
City, Prov	ince,	Posta	Code	Г											7	
Inregiste	red	Foal	Transf	er Repo	rt:											Date of Transfer///
Buyer's N	ame							ID	#			Phone				
			_									-				
Address	_	-														
City, Prov	ince,	Postal	Code													
we hereby	auth	orize ti	he trans	fer of sar	ne on th	ne bool	s of the	ASHA of	Canad	ia Reg	istry					
Signature	(s) o	f Reco	rded Ov	vner(s) of	Dam at	t time o	f Foalin	ig _								
into-security and	9200		W-2													
reeder's				[-	-	-	п.	Registra	ation #			
I hereby c	ertity	that tr	ie stalli	»"							ᆜ '	regisur	auon #			By:
was bred	to the	mare	named									Registra	ation#			Natural Hand Service dates
Owner of	d		of because	dina										1		Pasture Exposure fromto
Owner of	uam .	at time	or pree	uing										1		
																Artificial Insemination dates
			Signa	ture of re	corded	owner	/lessee	of stallion	at tim	e of br	reeding	3				During the year
					Ford	Course							CMBCo- *		Her	MCMBEDS FEE
						SCHEDUL nbershi						М	\$50.0		NON	MEMBERS FEE
							Transier.	through 6	mont	hs of a	ige		\$35.0			\$85.00
					1000			through I			50		\$50.0	0		\$100.00
								er 12 mo		2.5			\$150.			\$200.00
					DNA	TOTAL PROPERTY.	Mares a	nd Stallio	ns pre	viously	y bloo	d	\$70.0			\$120.00
					-7 pc	-/										

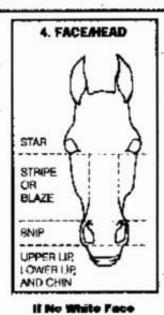


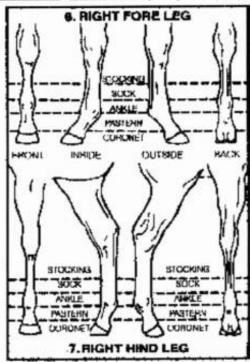
MARKINGS

COMPLETE 1-7. All white murkings should be indicated. Fake care that diagrams are accurate. It is strongly recommended that photographs of the horse be submitted with this application to make certain of future identification. For any horse with white markings above the knee. the hock or behind the ears (such as pintos), four current photographs showing both sides, from and rear MUSTaccompany this application.









WRITTEN DESCRIPTION OF MARKINGS: (Check box "None" if applicable)

	NONE	
1. BODY (LEFT): 2. LEFT FORE LEG:	NONE	
3. LEFT-HIND LEG:	NONE	[
4. FACE/HEAD:	NONE	
5. HODY (RIGHT):	NOME	
6. RIGHT FORE LEG:	NONE	
7. RIGHT HIND LEG:	NONE	

Name of Horse

Mail completed form with correct fees to: CLRC 2417 Holly Lane Ottawa, ON K1V 0M7 Tel. 613- 731-7110 Fax 613-731-0704