

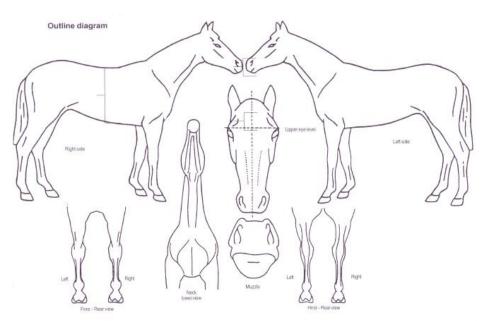
## **Equestrian Australia Transfer of Horse Registration Application**

This Form becomes a Tax Invoice on payment. Please copy for your records. (Branch ABN9 598 577 242)

Applications can only be accepted from current EA Members.

REGISTRATION No							NAME OF HORSE																					
PLEASE	LIST	THE	NAM	IES /	AND	ADD	RESS	ES OF	AL	L NE	w o	WNFI	RS															
NEW PF																					_	MEI	ИВЕF	NO.				
NEW PF	RIMA	RY O	WNE	R'S	POS	TAL A	ADDRI	ESS													J					<u> </u>	ı	
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Phone:								En	nail:																			
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NAME								ļ		J	Į.					<u>                                       </u>			1			MEMBER NO.						
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OTHER N	ЛARК	INGS	:											MI	CROC	HIP	No:											

The below Diagram must be completed accurately. Position of scars to be marked with an X. Whorls to be marked with an X



IN THE EVENT THAT THE CERTIFICATE OF REGISTRATION HAS BEEN LOST/DESTROYED PLEASE ARRANGE FOR THE NEW OWNER/S AND THE PREVIOUS OWNER/S TO SIGN THE BELOW STATEMENT OF RELINQUISHMENT AND ACKNOWLEDGEMENT OF OWNERSHIP RESPECTIVELY.

I/We			(	of (address]									
acknowledge ho	aving <b>relinqu</b>	ished owners	<b>ship</b> of the horse	named & des	scribed on this form, o	as from (date							
/ S	ignature			EA Member	Number								
I/We			(	of (address)									
acknowledge <b>o</b> v	wnership of t	he horse nam	ned & describe	d on this form, o	as from (date)								
/:	Signature			EA Membe	r Number								
		STATI	UTORY DEC	LARATION									
			EA Membership No:										
Of (address)													
(occupation)			a	solemnly and	sincerely declare that:								
Registration Certificate	e. the informati	on provided in	this statement is	s true and corre	o transfer the horse and ct and I acknowledge the E.A.								
And I make this solo of the <i>Oaths Act 186</i>		on conscientio	ously believing th	ne same to be tr	rue and by virtue of th	e provisions							
Declared at			in the Stat	e/Territory of									
this		day of			20								
					ned in front of an <b>autho</b> i								
` (Statutory Declaration			_	aration fto be sig	ned in Hone of an <u>addition</u>	iscu withess							
	-			horised witness/p	person before the declara	ation is made							
Name of Witness/pers	son:												
rame or triciness, per					Before whom the declar	ation is made							
Address:						ation is made							
Address:													
Address: Title or Qualification o	f Witness/pers	on:			PC	ation is made							
Address: Title or Qualification o ransfer \$100.00 □	of Witness/pers	on:le Numbers \$	30.00 (mandatory	for competitive Dre	PC Before whom the declara	ation is made							
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Address:  Title or Qualification of transfer \$100.00   Dressage/Pony Licence   R  Payment Detail	of Witness/pers  Dressage Brid  e	on:	30.00 (mandatory  ☐ Showjumping  AYMENT DET  Coorparoo DC,  dmin@equestria  G BY CARD AN A	for competitive Dre Licence Sho AILS 4151 or Fax to ngld.com.au	Before whom the declaratessage) Total Payable: \$ ow Horse Licence	ation is made  venting Liceno  APPLY							

**CARD NUMBER:**