

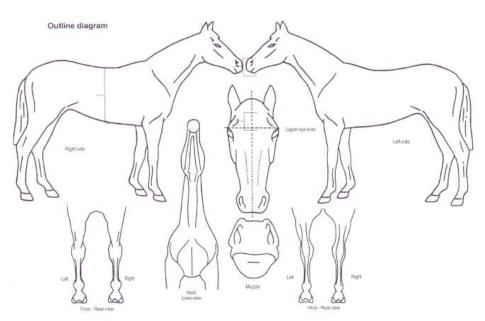
Equestrian Australia Transfer of Horse Registration Application

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	
SUBURE	<u>1</u> 3																							<u> </u>	POS	T CC	DE	
]		<u> </u>		
Phone:								En	nail:																			
OTHER		. OW	NFR/	'S (N	MIIS.	r RF	CLIRR				BFR/	S) Se	_ F	Δ G	ner	al R	egula	tions										
NAME	IVLV	011	IVEIT	J (1	VIOS	I DL	COM	LIVI	.A IV	/1L1V1	DLITY	3, 30	C L	A 00	LIICI	ai iv	cguic	10113	,		_	ME	MBE	R NC).			
NAME								ļ		J	Į.					<u> </u>			1			MEI	MBEF	R NO				
	J																				J					<u> </u>		
IS THI	IS HC	ORSE	CURF	REN	TLY	/ACC	CINAT	ED FO	OR T	ГНЕ	HEND	DRA V	IRU	JS?	YES	/ N	O. IF	YES,	DA	TE LA	ST \	/ACCI	NATE	D: _	_/_	/_	_	
COLOUF	₹:												S	EX:			□G	elding	3		1are		Stall	ion				
BREED:											FC	AL								HEIG	ЭНТ	in						
BRLLD.											D/	ATE:								Han	ds:							
MARKING	iS													SIR	E:													
HEAD:	HEAD:						DAM:																					
NEAR FOR														SIR	E OF	DAN	V 1:											
OFF FORE	:																											
NEAR HIN	ID:													BRAND N/S:														
OFF HIND	D:													BRAND O/S:														
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 h	naving relinquished	ownership of the horse named & described on this form, as from (date
_		EA Member Number
		of (address]
acknowledae c	ownership of the ho	orse named & described on this form, as from (date)
•	•	EA Member Number
		STATUTORY DECLARATION
. (full name)		EA Membership No:
occupation)		do solemnly and sincerely declare that:
of the Oaths Act 18	67	in the State/Territory of
		day of 20
		e of person making this declaration [to be signed in front of an authorised witness] ilable at www.ag.gov.au)
		Signature of authorised witness/person before the declaration is made
Name of Witness/per	rson:	Before whom the declaration is made
Address:		PC
	of Witness/person:	Before whom the declaration is made
itle or Qualification		
		mbers \$30.00 (mandatory for competitive Dressage) Total Payable: \$
ransfer \$100.00 □	l Dressage Bridle Nun	mbers \$30.00 (mandatory for competitive Dressage) Total Payable: \$
ransfer \$100.00 🗆	l Dressage Bridle Nun ce □ Interschool Li	mbers \$30.00 (mandatory for competitive Dressage) Total Payable: \$ cence
ransfer \$100.00 🗆	l Dressage Bridle Nunce □ Interschool Li	mbers \$30.00 (mandatory for competitive Dressage) Total Payable: \$ cence
ransfer \$100.00 ressage/Pony Licen f Payment Deta	l Dressage Bridle Nunce □ Interschool Li Return EQ, PO Box E ils: {PLEASE NOTE: I	mbers \$30.00 (mandatory for competitive Dressage) Total Payable: \$ cence
ransfer \$100.00 □ ressage/Pony Licen	l Dressage Bridle Nunce □ Interschool Li Return EQ, PO Box E ils: {PLEASE NOTE: I	mbers \$30.00 (mandatory for competitive Dressage) Total Payable: \$ cence
ransfer \$100.00 ressage/Pony Licen f Payment Deta	l Dressage Bridle Nunce □ Interschool Li Return EQ, PO Box E ils: {PLEASE NOTE: I	mbers \$30.00 (mandatory for competitive Dressage) Total Payable: \$ cence

CARD NUMBER: