

NAME ON CARD: **CARD NUMBER:**

Equestrian AustraliaReplacement/Duplicate Certificate of Registration Application



This Form becomes a Tax Invoice on payment. Please copy for your records. (Branch ABN 79 598 577 242)

PRIMARY OWNER'S NAME PRIMARY OWNER'S POSTAL ADDRESS SUBURB POST CODE Phone: Email: OTHER OWNER/S (Must be Current EA Member/s) See EA General Regulations NAME MEMBER NO. MEMBER NO. MEMBER NO. MEMBER NO. The below Diagram must be completed accurately. Position of scars to be marked with an X. Whorls to be marked with an X. Outline diagram
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Outline diagram Upper eye level
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Upper eye level Luft side
VI / Let side
VI / Let side
VI / Let side
V/ /
V/ /
Right side (())
AB ((v)) RA AA
Let Neck Muzzle Let Right
Fore -Rearriem
I am the current owner of the horse named and described above, the Certificate of Registration has been lost/destroyed and I
would like to apply for a Duplicate copy. Signature of Pogistered Owner.
Signature of Registered Owner Date:
☐ Replacement/Duplicate Certificate Fee \$100.00 Total Payable: \$
PAYMENT DETAILS
Return: Equestrian Qld, Sports House Milton, 150 Caxton St, MILTON, Q 4064 or Email: admin@equestrianqld.com.au
Payment Details: {PLEASE NOTE: IF PAYING BY CARD AN ADDITIONAL 1.5 % BANK CHARGE WILL APPLY} PLEASE FILL IN FOR PAYMENT BY CREDIT CARD
Signature
TYPE OF CARD UISA Mastercard Bankcard EXPIRY DATE /