

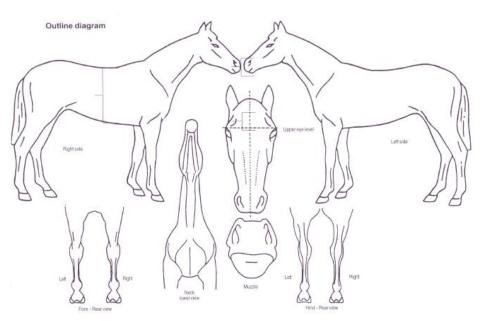
Equestrian Australia Transfer of Horse Registration Application

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

Applications can only be accepted from current EA Members.

REGISTRATION No						NAME OF HORSE																					
PLEASE LIS	T THE	NAN	1ES /	AND	ADD	RESS	ES OF	ALL	. NE\	N OV	NNER	S															
NEW PRIM	IE																MEMBER NO.										
NEW PRIM	ARY C) WNE	R'S	POST	AL A	DDRE	SS	l	1		ļ	<u> </u>											l				
SUBURB									1												1			POS	T CO	DE	
Phone:	Phono: Email:																										
	Phone:Email:																										
NAME	THER NEW OWNER/S (MUST BE CURRENT EA MEMBER/S) See EA General Regulations MEMBER NO.																										
NAME																					MEMBER NO.						
INAIVIE				T				1											IVILIVIDEN IVO.								
IS THIS H	IORSE	CURI	REN	TLY \	/ACC	INAT	ED FC	R T	не н	IEND	RA V	IRU	s?	YES /	NC). IF	YES,	DAT	E LAS	T V	ACCI	NATE	D: _	_/_	_/_	_	
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BREED:											FOA DAT								HEI Har		ın						
MARKINGS: (complete written description to clarify markings diagram)											SIRE:																
HEAD:												DAM:															
NEAR FORE:											SIRE OF DAM:																
OFF FORE:																											
NEAR HIND:												BRAND N/S:															
OFF HIND:												BRAND O/S:															
OTHER MARKINGS:											MICROCHIP 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 (addres	ss]				
acknowledge h	aving relinquis h	ned ownersh	ip of the hor	se named	& describe	d on this forn	n, as	from (d	ate
//									
I/We									
acknowledge c	wnership of the	horse name	ed & describe	ed on this f	orm, as fro	m (date)			
//	Signature			EA Me	ember Nun	nber			
A statutory		egal document ed as evidence	TORY DEC	a written sta tnessed by a	tement abo n approved	person.	nat is	true.	
l, (full name)									
of (address)					p				
(occupation)				do solemnly	and sincer	ely declare th	at:		
I am the new owner previous owner to sig Registration Certificat I hereby declare tha misleading Statemen	n that they have r te. t the information	elinquished ov provided in t	wnership. I wo	ould like to a	pply to trans	fer the horse a	nd rec	ceive a ne	ew
And I make this sol			•			ıd by virtue of	the	provisio	ns
of the Oaths Act 18			,			•			
Declared at			in the St	ate/Territory	of				
this		day of				20			
x	Signa	ture of person	making this de	claration [to	be signed in	front of an aut	horise	ed witnes	<u>ss</u> .
(Statutory Declaratio	n Signatory List is	available at wv	ww.ag.gov.au)						
Before me x			Signature of au	ıthorised wit	ness/person	before the dec	laratio	on is mad	le
Name of Witness/per	son:				Before	whom the dec	laratio	on is mad	le
Address:						PC_			
Title or Qualification	of Witness/person	:			Before	whom the dec	laratio	on is mad	le
Transfer Life \$110.0	00 □ Transfer B	ase \$ free □	Dressage Bri	dle Number	s \$30.00 (n	nandatory for cor	npetit	ive Dressa	age
Dressage/Pony Licen		umping Licenc	_	w Horse Lice		Eventing Lice			•
		PA	YMENT DE	ΓAILS					
urn: Equestrian Qld,	Sports House M	ilton, 1.05/15	50 Caxton St,	MILTON, Q	4064 or Em	nail: enquiries@	eques	strianqld.	.co
{{PLEASE NOTE: /	AN ADDITIONAL 1.5	% BANK CHARG	SE WILL APPLY	TO ALL CRED	IT CARDS}	Total Payal	ole: \$_		
EDIT CARD DETAILS			Signature_					_	
PE OF CARD		VISA	☐ Mast	ercard		EXPIRY DATE		/	
ME ON CARD:							1		
RD NUMBER:									