



The International Spanish Warmblood Horse Association

<b>OFFICE USE ONLY</b>
Registration # _____
Authorized by: _____
Date: _____

## Application for Mature Horse Registration (Appendix sections A and B)

Desired Name of Horse (30 characters max)    2<sup>nd</sup> Choice of Name    Date of Birth ( dd/mm/yyyy)    Sex

Microchip #    Colour    Height    Markings per diagram

Surname    Given Names    Farm Name    +    Phone # (inc Country code e.g. +44- )

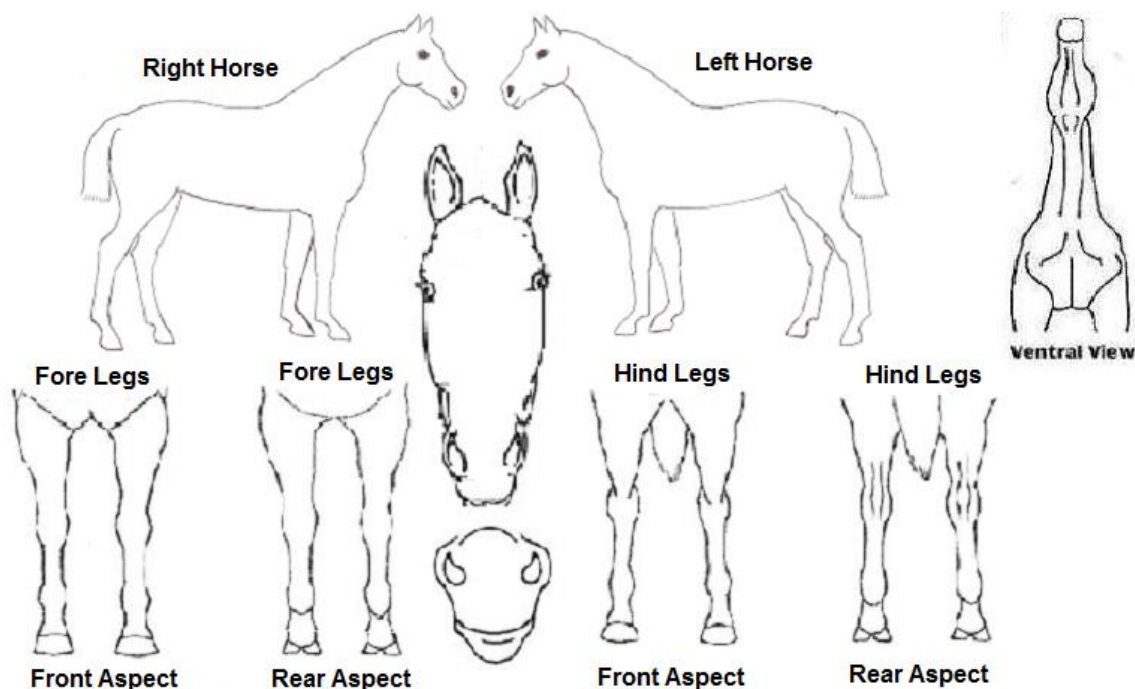
Full postal address    State/Country    Country

E-mail    Website

**PLEASE COMPLETE PEDIGREE AS ACCURATELY AS POSSIBLE**

<p style="text-align: center;"><b>Sire's Name</b></p> <p>Breed: _____ Reg# _____</p> <p>Name of Registry: _____</p>	<p style="text-align: center;">Name</p> <p>Breed: _____ Reg# _____</p> <p style="text-align: center;">Name</p> <p>Breed: _____ Reg# _____</p> <p style="text-align: center;">Name</p> <p>Breed: _____ Reg# _____</p> <p style="text-align: center;">Name</p> <p>Breed: _____ Reg# _____</p> <p style="text-align: center;">Name</p> <p>Breed: _____ Reg# _____</p>	<p style="text-align: center;">Name</p> <p>Breed: _____ Reg# _____</p> <p style="text-align: center;">Name</p> <p>Breed: _____ Reg# _____</p> <p style="text-align: center;">Name</p> <p>Breed: _____ Reg# _____</p> <p style="text-align: center;">Name</p> <p>Breed: _____ Reg# _____</p> <p style="text-align: center;">Name</p> <p>Breed: _____ Reg# _____</p>	<p style="text-align: center;">Name</p> <p>Breed: _____ Reg# _____</p> <p style="text-align: center;">Name</p> <p>Breed: _____ Reg# _____</p> <p style="text-align: center;">Name</p> <p>Breed: _____ Reg# _____</p> <p style="text-align: center;">Name</p> <p>Breed: _____ Reg# _____</p>
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Please clearly mark all white markings with black ink. Whorls/cowlicks may be shown with an X



If this horse is already registered with other registries, please provide details here:

Registration # _____	Registered Name of Horse _____	Name of Registry _____	DNA on file? _____
Registration # _____	Registered Name of Horse _____	Name of Registry _____	DNA on file? _____

**Enclosed Fees**

Please refer to fee chart on website

<b>Registration Fee</b> \$ _____	Visa/Mastercard # _____ Exp _____
<b>Microchip Fee</b> \$ _____	Card Holder's Name _____
<b>DNA Fee</b> \$ _____	Signature _____ Date _____
<b>TOTAL</b> \$ _____	For PayPal payments, please use <a href="mailto:contact.ISWHA@gmail.com">contact.ISWHA@gmail.com</a> and attach a copy of the receipt.

**Please remember to submit:**  
 Photos and Video  
 Copy of Dam's registration certificates  
 Copy of Sire's registration certificates  
 Copy of additional registration certificates  
 If horse is registered with other registries

I certify that the information on this form is true and correct to the best of my knowledge.  
 I understand and agree to the rules and regulations for registration with the ISWHA.

Owner's Signature _____	Date (dd/mm/yyyy) _____	ISWHA Membership # _____
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