

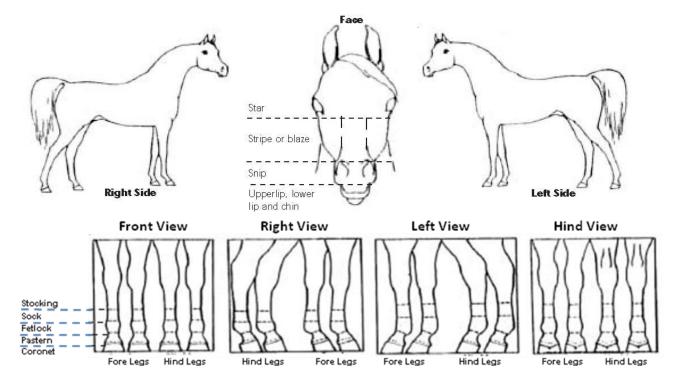
American Shagya Arabian Verband, Inc.



SHAGYA SPORTLO REGISTRATION APPLICATION

MAIL TO: ASAV REGISTRAR, 15918 Porter Road Verona, KY 41092, USA

| Breed Registry SIRE: | | | Registration # | | | D | DNA or Blood on File | | | | | Hors | ses N | lame Color | | | |
|---|-------------------|---------|----------------|---------|--------|----------------|------------------------|--------------|--------|--------------|---------|------------|-------|--|--|--|--|
| DAM: | | | | | | | | | | | | | | | | | |
| DAIVI. | | | REC | COR | DE | D OW | /NE | R OF | DA | M AT | TII | ME O | FF | OALING | | | |
| Name | | | | | | | | | | | | | | | | | |
| Name | | | | | | | Address State Zip code | | | | | | | Fax # | | | |
| Home Phone | | | | | | V | Work Phone | | | | | | | E-mail | | | |
| As recorded own that the Associat | | | | | | | | | | | | _ | | is true and correct to my personal knowledge and agr | | | |
| Signature_ | | nege ic | Conect | ariu oi | Carice | i tile regi | stratio | in certifica | 16 101 | cause un | uei ita | s ruies ai | | Date | | | |
| - | int ownership re | quires | ALL sign | atures | s.) | | | | | | | | | Date | | | |
| , , , | HORSE INFORMATION | | | | | | | | | | | | | | | | |
| Name Reque | ested (PLEA | SE F | PRINT | CLE | ٩RL١ | () | ı | | ı | | 1 | | | | | | |
| 1st choice | | | | - | | | | | | | | | | Foaling Date:/ | | | |
| 2nd choice | | | | | | | | | | | | | | Sex: Stallion Mare Gelding | | | |
| 3rd choice | | | | | | | | | | | | | | | | | |
| Body Color: Bay Grey Chestnut Buckskin Dun Palomino Black Black Bay Brown | | | | | | | | | | | | | | | | | |
| Liver Chestnut Grullo Tobiano Overo Lepard Blanket Snowflake Roan | | | | | | | | | | | | | | | | | |
| Brands, tatto | os or other | perm | nanent l | D: | | | | | | | | | | | | | |
| | | | | | | | | and add | itior | nal phot | os o | n marl | kings | if necessary. | | | |
| | | | | RE | COR | DED O | WN | ER OF | DAI | M AT TI | ME | OF BF | REED | DING | | | |
| Name | | | | | | | | | | | | | | | | | |
| City | | | | | _ s | State Zip code | | | | | | | Fax # | | | | |
| Home Phone I hereby certify that I was the recorded owner of | | | | | | V | Work Phone | | | | | | | _ E-mail | | | |
| - | | | | | | | | | | | | | | | | | |
| Signature | | | | | | | | | | | | | | Date | | | |
| (Joint ownership requires ALL signatures.) Designated Breeder sign here | | | | | | | | | | | | | | Date | | | |
| Designated | siccaci sigi | THOR | <u> </u> | | COR | DED O | WN | ER OF | SIR | E AT TI | ME | OF BF | REED | | | | |
| Name | | | | | | _ A | ddre | ess | | | | | | | | | |
| City | | | | | | | | | | | | | Fax # | | | | |
| | | | | | | | | Phone | | | | | | E-mail | | | |
| I hereby certify that I was the recorded owner of t | | | | | | | | ion liste | d at | the time | e the | e mare | was | s bred. | | | |
| By: Artificial Inseminations: | | | | | | | Pasture Breedings: | | | | | | | Embryo Transfer: | | | |
| coole | d or frozen | (circle | e one) | | | | | | | | | | | | | | |
| List Dates: | | | | | | _ L | List Dates: | | | | | | | List Date: | | | |
| Signature | | | | | | | | | | | | | | Date: | | | |
| (Jo | int ownership re | quires | ALL sign | atures | s.) | | TD A | NCEED | INIE | FORMA | TIO | NI | | | | | |
| Name | | | | | | | | | | | | | | | | | |
| Name | | | | | | | | | | | | | Fax # | | | | |
| Home Phone | | | | | | | • | | | | | | | | | | |
| | | s the | record | ed o | wner | | | | | | | | | _ E-mail the stallion. | | | |
| Signature | | | | | | | | | | | | | | Date | | | |
| - | int ownership re | | | | | | | | | | | | | | | | |



Important: To avoid processing delays be sure to fill in all blanks completely and accurately.

- 1. **DAM OWNER INFORMATION:** The recorded owner of the dam at the time of foaling is responsible for the completion of this section and will be recorded as the original owner of the foal.
- HORSE INFORMATION: The name choices for the foal, foaling date, sex, body color, coat pattern, and parent information is required in this section. All information pertaining to both parents must be completed in order to register the foal.
- 3. **SIRE INFORMATION:** The recorded owner of the stallion is responsible for the completion of the sire's information section. All dates of breeding and how the mare was bred must be indicated.
- 4. **TRANSFER INFORMATION (optional):** The recorded owner of the dam at the time of foaling is responsible for the completion of this section if the foal is to be registered in a name other than the recorded owner of the dam at the time of foaling, signatures of both the seller and the buyer are required. A transfer fee of \$15.00 must be submitted when this section is completed.
- FEES: All fees (U.S. Funds only) must accompany this application. Fees are based upon the date the application is postmarked and the membership status of the owner at the time the registration work is submitted. In case that fees are not included, the unprocessed work will be returned.
- 6. **MARKINGS:** All white markings must be indicated. If horse has no white facial markings, please indicate by checking the box below.
- PHOTOGRAPHS: If pattern is indicated, four current photographs showing both sides, front and rear, must accompany
 this application. Photographs must also accompany application for coats of Black Bay, Brown, Grullo or Liver Chestnut.
- 8. SHAGYA SPORTLO: Application must be accompanied with a copy of the Certificate of Registration for the other parent.

| GLASS EYE (blu | ne) | ☐ Yes | □ No | ☐ Left | ☐ Right |
|----------------|-------|-------|----------------|--------|---------|
| Hoof Color | Light | Dark | <u>Partial</u> | | |
| Right Fore Leg | | | | | |
| Left Fore Leg | | | | | |
| Right Hind Leg | | | | | |
| Left Hind Leg | | | | | |
| | | | | | |

If horse has not white facial or leg markings, please check: \Box