

(shaded areas for office use only)

REGISTRATION NUMBER ISSUED



AMERICAN BLAZER HORSE ASSOCIATION, INC.

16114 Idaho Center Blvd, Suite 3
Nampa, ID 83687
(208) 461-1055
www.BlazerHorse.com

Established & Incorporated 2006

APPLICATION FOR REGISTRATION

(Please print)

Horses Information: Date Foaled: _____ Foaled At: City _____ State _____

Gender: (circle one) STUD / MARE / GELDING Date gelded: _____

Horse's Body Color: (circle one)

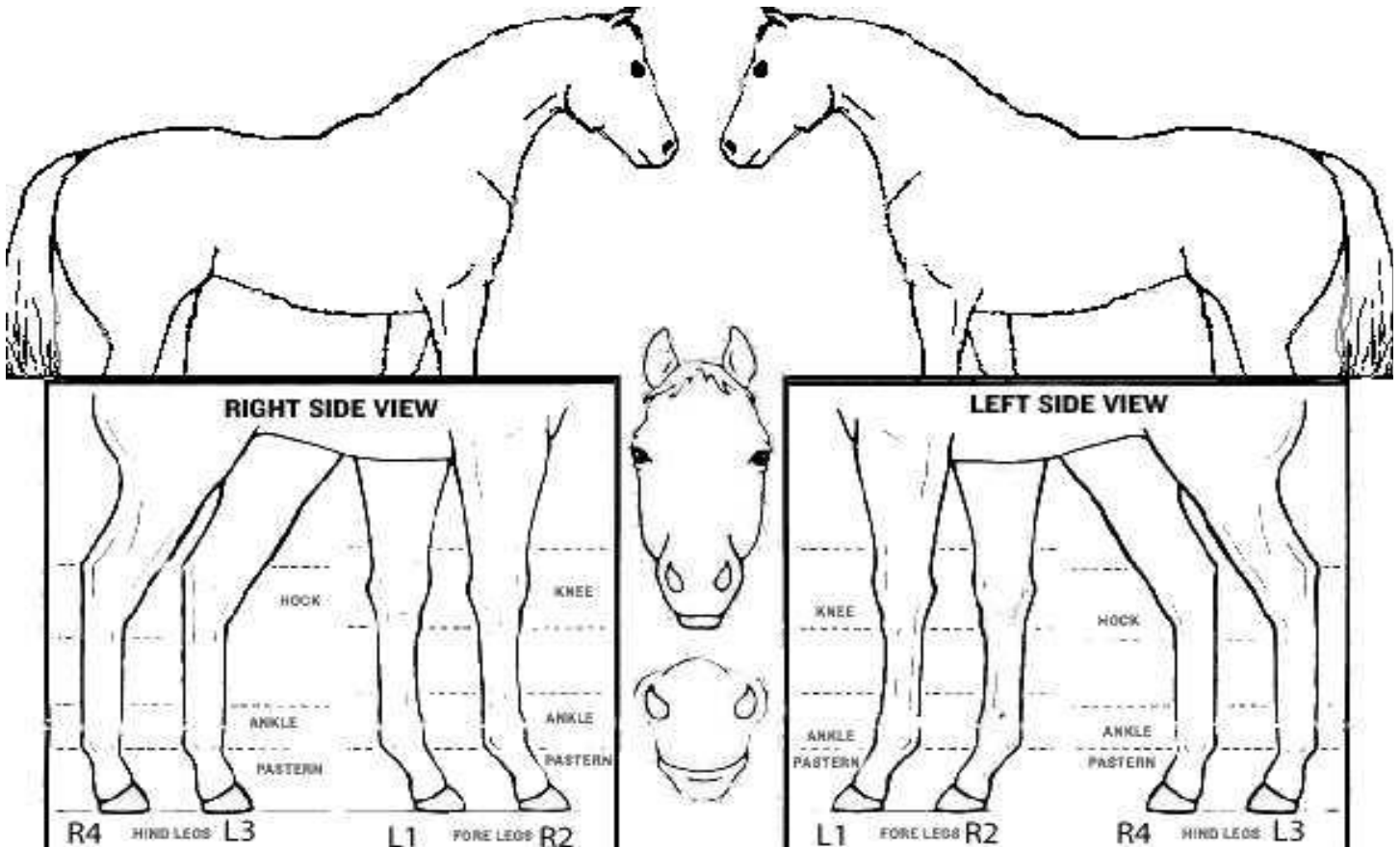
Sorrel	Brown	Dun	Grulla	Palomino	Bay Roan	Blue Roan
Chestnut	Bay	Red Dun	Black	Buckskin	Red Roan	

Mane and/or Tail flaxen, silver or white?: Yes / No

Eye Color: _____

NAME 1st choice _____ 2nd choice _____

(Names to be no longer than 30 characters, including spaces. For more information on naming your horse see Rules and Regulations).



Please include a minimum of eight (8) photographs (front, rear, left and right sides, top line, belly and closeup of each eye) which CLEARLY identify your horse's markings. If white markings on face or below knee/hock, close-up photos would be helpful. Comments: _____

In order to grant registration, the applicant must have one registered Blazer parent. All horses registered before 2006 in the Blazer Horse Association will be accepted. Sires or dams not registered with the ABHA should file for a breeding stock number; their pedigree information and description will then be entered into the ABHA "Breeding Stock" record, allowing their pedigree information to be shown on their offspring's registration certificate.

A stallion's breeding report must be on file with the ABHA office or must accompany this application if the sire is to be listed on the applicant's pedigree. If no stallion report is available, the sire will be listed as "unknown".

Sire Information: Sire's Name: _____

ABHA Reg# or ABHA Breeding Stock#: _____

Sire's Primary Equine Registry and Reg# if not ABHA: _____

Sire's Registered Owner/Agent: _____

Address and Phone: _____

Dam Information: Dam's Name: _____

ABHA Reg# or ABHA Breeding Stock#: _____

Dam's Primary Equine Registry and Reg# if not ABHA: _____

Dam's Registered Owner/Agent: _____

Address and Phone: _____

Signature of the Dam's Owner at time of foaling: _____

Owner(s) Information: ABHA Membership Number: _____

Owner(s) Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: () _____

Email: _____

Signature of owner verifies all information to be true and correct to the best of their knowledge:

Signature: _____ Date: _____

Completed application, 8 required photographs, registration fees and membership dues (where applicable) payable in US funds; must be included with application. Send all documents and fees to the ABHA using the address on Page one of this application. Please include membership form if not a current member. You must be a current member to transact any Registry business.

Calendar Birth Year	\$35	ABHA Membership:	
1 to 3 years (starts Jan 1 after birth yr	\$100	Annual Membership:.....	\$35
4 Years & over (starts Jan 1, 3 yrs after birth yr.....	\$200	Lifetime Membership	\$300