

Date: / /

Venue:

SHOW HORSE COUNCIL OF AUSTRALASIA INC.

ABN 51 590 953 920

APPLICATION FOR PROVISIONAL OR ANNUAL MEASUREMENT

I/We the undersigned hereby make application to have the horse/galloway/pony detailed below measured in accordance with the SHC Measuring Scheme Rules and declare that we have read, understood and agree to abide by these rules.

NATIONALSADDLEHORSEREGISTEREDHORSES:FEES: Provisional & Annual:\$15. LIFE \$75

HORSES HOLDING REGISTRATION/ OTHER THAN N.S.H.R.: FEES: Provisional & Annual: \$15.

NAME OF HORSE:

REGISTERED WITH:REG. NO:

SEX:COLOUR:FOALING DATE:

BRANDS: Please draw as visible on the horse.

N/S	O/S
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MARKINGS:

M/Chip No: (If applicable).....

NAME OF OWNER:

ADDRESS OF OWNER:

..... P/CODE: Ph.

Tick Box - a) or b)

a) The horse detailed above DOES NOT HOLD a current Provisional or Annual measurement issued by the SHC or any other Organisation or Breed Society.

b) The horse detailed above DOES HOLD a CURRENT MEASUREMENT Issued by

..... at the height of
(Organisation or Breed Society)

If SHC Cert. No. & Date:

Print name of applicant

Signature as Owner/Lessee/Agent:

This form is to be completed in all respects & presented for Measurement with Registration Papers & appropriate fee
OFFICE USE ONLY

Please Print Clearly

Measurer's Signature

Card Issued

If required to return - 1st Measure:

Time:.....

Height:.....

Comment.....

Measurer.....

Measurer:
.....
SHC Representative:
.....

Provisional - Annual - LIFE
.....

If required to return - 2nd Measure:

Time:.....

Height:.....

Comment.....

Measurer.....

Receipt Issued & Stewards Sign.

Receipt No:
.....
Steward:
.....

Height Issued At:

.....hh
.....cm.