

New Zealand Miniature Horse Association Inc.



Return Form To:
NZMHA Registrar

Reg. No

NOTICE OF DEATH

Registered Name of Horse:

Date Died:

 / /

NZMHA Registration Number:

Owner:

Printed Name	Phone ()
Address	

Cause of Death:

(if known)

Declaration: - I hereby certify that all information supplied in relation to this notice of death is true and correct to the best of my knowledge. I acknowledge that information provided in this notice may be used in any official publication. Furthermore I accept that once this form has been lodged there will be no refund of any fees if I choose to withdraw this notice.

Signatures:

(all to sign)

Date: / /

Note: The original certificate of registration **must** be returned. If you would like it returned endorsed **DECEASED** then please include a self addressed envelope.

Checklist

- | | |
|--|--|
| <input type="checkbox"/> All details completed | <input type="checkbox"/> Form Signed |
| <input type="checkbox"/> Original Registration Certificate included/attached | <input type="checkbox"/> Self Addressed Envelope (if require certificate back) |

Note: A Rework Fee will be charged in relation to any/all applications submitted that are incomplete

07/2005

