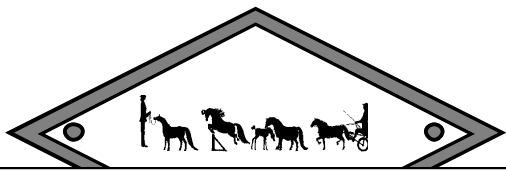


New Zealand Miniature Horse Association Inc



Affiliated to the Royal Agricultural Society of NZ Inc

Please return form to
NZMHA Measuring Coordinator

REFUSED HEIGHT CERTIFICATE RETURN

Name of Affiliated Club: _____

Contact Person: _____

Phone: _____ Email: _____

DETAILS OF MEASURING DAY:

Date: ____ / ____ / ____ Time: ____ : ____ am/pm Venue: _____

HORSE AND OWNER DETAILS:

Horse: _____

Rego No.: _____ Height Cert #: _____

DOB: _____

Owner: _____

Measurer: _____ Witness: _____

Reason
Certificate
Refused or
Declined

DECLARATION: - I hereby certify that all information supplied is true and correct to the best of my knowledge and that I will ensure that this return is returned to NZMHA within seven days of the measuring taking place.

Signature: _____

Date: ____ / ____ / ____

Position: _____

Checklist

All details completed

Form Signed

10/2013

