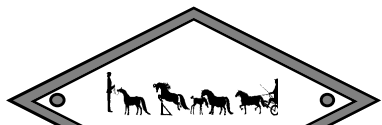


New Zealand Miniature Horse Association Inc.



Affiliated to the Royal Agricultural Society of NZ Inc

Return Form To:
NZMHA Registrar

Reg. No

STALLION SOUNDNESS CERTIFICATE

Registered Name of Stallion:

Foaling Date:

 / /

NZMHA Registration Number:

Owner:

Printed Name	Phone ()
Address	

Age: (please tick **one** box) 2 years 3 years 4 years Other age

Note: As of February 5, 2005 horses must be at least twelve months of age before they can be vetted for a stallion soundness certificate

To be completed by a qualified Veterinarian

Note to Vet: - Please compare this horse with the photos and details on the registration certificate or application for registration to confirm identity of horse

I hereby certify that I have examined the above named stallion and found the stallion to have no clinical evidence of the following conditions at the date of examination.

Name of Vet _____ Date of Examination _____ / _____ / _____

Place a tick in the box only if the stallion is free of the condition. Place a **X** in the box if the stallion shows signs of the condition and add a comment if appropriate

- Congenital Cataracts _____
- Overshot Jaw _____
- Parrot Mouth _____
- Dwarfism _____
- Malformation of the Genitals
(External examination only) _____
- Cyporchid or Monorchid _____
- Locked Stifle _____
- Nasal Disease _____
- Stringhalt _____
- Other Determinable Genetic Faults _____

Signed _____ Date: _____ / _____ / _____

Qualifications: _____

Exact Markings of the Stallion (Please print in block letters)

Reverse Side Must be Completed

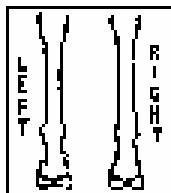
05/2010



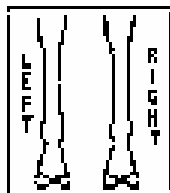
Colour

Brands Eye Colour

Please outline and fill in all white markings, brands and whorls on the diagrams below

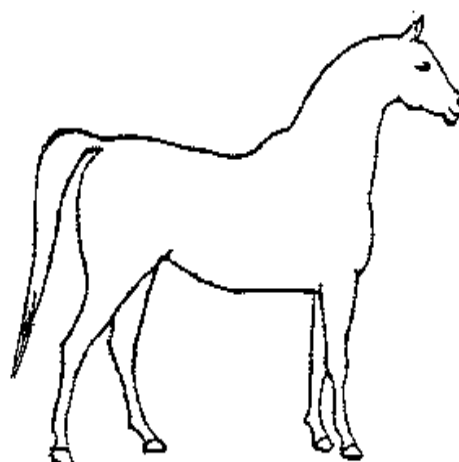
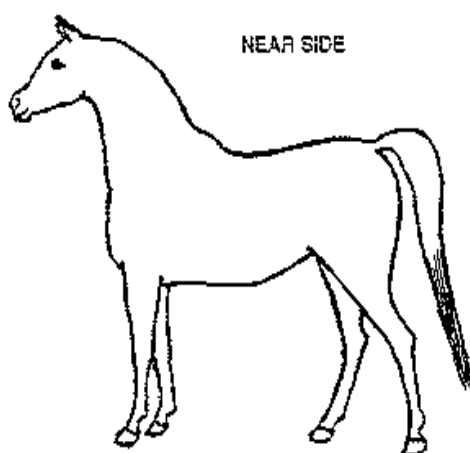


Hind Legs



Fore Legs

Rear View



Height Certification

NO CHANGES ARE TO BE MADE TO THIS SECTION OF THE FORM – ANY CHANGES MEAN A NEW FORM MUST BE COMPLETED

We hereby certify that the above named horse was measured in accordance with NZMHA regulations (ie. from the base of the last true hair of the mane to the ground while the horse was standing squarely on a level surface) and found to be :

inches in height.

Name of Measurer (please print)

Name of Witness (please print)

Signature of Measurer

Signature of Witness

Checklist

- All details completed
- Form Signed by Vet/Measurer/Witness
- Correct fees included/attached
- Original Registration Certificate included/attached

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