



WORLD ASIL ARABIAN REGISTRY

REGISTRATION APPLICATION FOR HORSES ALREADY REGISTERED IN YOUR RESIDING COUNTRY

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RESIDING COUNTRY REGISTRY

PLEASE PRINT NAME AND REGISTRATION NUMBER

NAME (country & number) _____

NAME OF HORSE _____

COLOUR ___ BAY ___ CHESTNUT ___ BLACK ___ GREY ___ ROAN ___

SEX ___ MARE ___ STALLION ___ GELDING ___ DATE CASTRATED (Month ___ Day ___ Year ___)

SIRE OF HORSE (_____) REG # (_____) COLOUR (_____)

DAM OF HORSE (_____) REG# (_____) COLOUR (_____)

WHITE MARKINGS (HEAD) _____

LEGS (RIGHT FORE) _____ (LEFT FORE) _____ (RIGHT HIND) _____

(LEFT HIND) _____ HOOF (RIGHT FORE) _____ (LEFT FORE) _____ (RIGHT HIND) _____

(LEFT HIND) _____

OWNER INFORMATION

OWNER _____

ADDRESS _____

TELEPHONE (Home) _____ (Office) _____

(Cell) _____ (email) _____

PLEASE SUBMIT A PHOTOCOPY OF REGISTRATION PAPERS (FRONT AND BACK) WITH APPLICATION

PLEASE SUBMIT A CLEAR PHOTO OF YOUR HORSE'S HEAD, FULL RIGHT SIDE AND LEFT SIDE
SHOWING ALL 4 FEET.