Application for Dual Registration

For horses currently registered with
another official breed/bloodline registry. .

Office Use Only

Received _____
Number _____
Section _____
Completed _____
By _____

Identification

Name Choices:

1st
2nd
3rd

Registry's currently registered with: (Please include legible photo copy of registration certificates)

_____ # _____

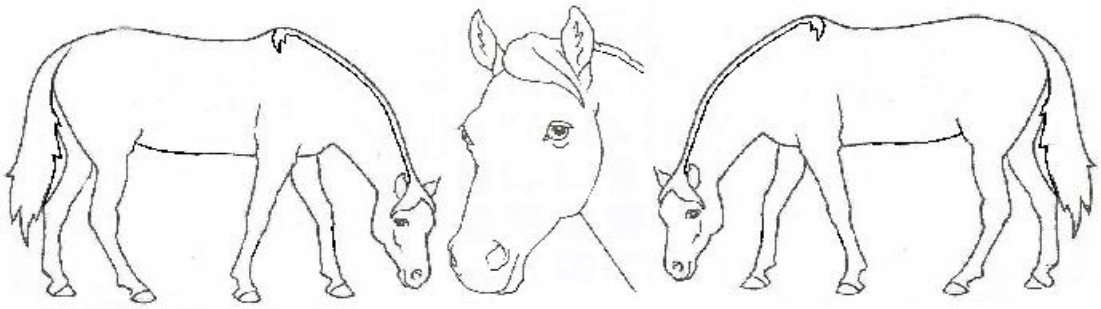
_____ # _____

_____ # _____

_____ # _____

Markings

Please **shade in, and identify** placement of all white markings, brands, and scars.



Draw Brand here
If no brands print " No Brands" in box

Draw Lip/EarTattoo # here

Ownership

(Must be the same as listed on all other registration certificates)

Current Owner: _____ Email _____

Address _____ City _____ State _____ Phone _____

Person purchased from _____ Date purchased _____

Address _____ City _____ State _____ Phone _____

By submitting this form I agree to release all the information herein to the National Quarter Horse Registry for recording and educating purposes. I understand that the names, address and personal information on this application will not be released to anyone with out my permission, unless requested by a court of law. Further I will certify that I am the legal owner of the applicant horse, and all of the information being submitted on the application is true and correct to the best of my belief and knowledge.

Signature: _____ Date: _____

Please be sure to submit: four full body (right, left, head, tail) photos of the horse to be used on your certificate.