

SHOW HORSE COUNCIL OF AUSTRALASIA INC.



ABN 51 590 953 920

www.showhorsecouncilaust.com.au

Email: admin@shca.org.au

UPDATED September 2018

PAYMENT SHEET - FEES Valid from 1/7/2017

(To be completed & lodged with NSH Application/Papers and Fees, mail or email only.)

Address: NSH Registrar, SHC. P.O. Box 776 Richmond NSW 2753

NSH REGISTRATION:

NEW REGISTRATION APPLICATION:	\$120 Gst incl.
Plus PRIORITY ADMIN FEE if applicable	\$50 Gst incl.
TRANSFER or LEASE:	\$85 Gst incl.
LATE TRANSFER:	\$99 Gst incl.
NAME CHANGE OF HORSE:	\$99 Gst incl.
REPLACEMENT PAPERS:	\$85 Gst incl.
CORRECTION:	\$60 Gst incl.

From 1st October 2017 Payment of a PRIORITY Admin Fee of \$50 is to be added to each NSH Application lodged a minimum of 7 days prior to & up to Closing Date for Entry in a GN Qualifier. All other Applications processed in order of receipt.

NSH Transactions will only be processed if submitted by current financial members of The Show Horse Council of Australasia Inc. and its Affiliates.

MEMBER'S NAME

ADDRESS:

PHONE: **EMAIL:**

NAME OF SHC AFFILIATE:

MEMBERSHIP No. **CURRENT TO DATE:**

PROCESS REQUIRED: **PERFORMANCE CARD** YES /NO

PAYMENT DETAILS Please select one option below

Payable to Show Horse Council of Australasia Inc. by Direct Deposit, Visa/Mastercard or Cheque Amount:\$

DIRECT DEPOSIT BSB 062 628 Account 0090 5955		Reference: Owner/Payee/Horse Name	
CREDIT CARD PAYMENT OPTION	I wish to pay by	<input type="radio"/> Mastercard	<input type="radio"/> Visa
AMOUNT: \$	EXPIRY DATE: _____ / _____ / _____	Mob	_____
C/C NUMBER: _____ / _____ / _____	CVN	_____	
PRINT CARDHOLDERS NAME:			
CARDHOLDERS SIGNATURE:			

Rec'd:

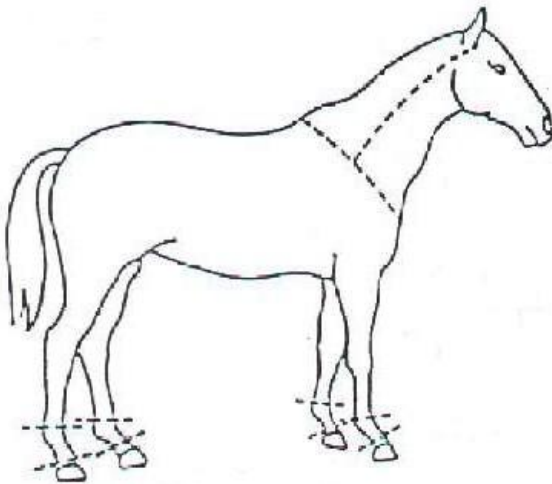
Processed:

Reg. No.:- HC.

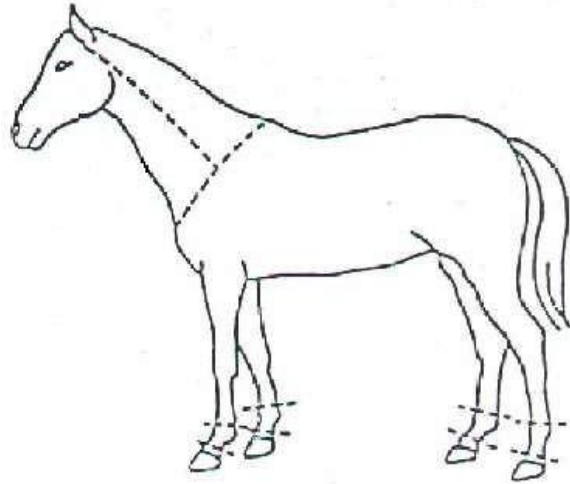
HORSE IDENTIFICATION

The applicant to clearly **DRAW ALL BRANDS, WHITE MARKINGS, WHORLS (O) & SCARS (X)** on the diagrams ascertained from a visual inspection of the horse as well as complete written description below.

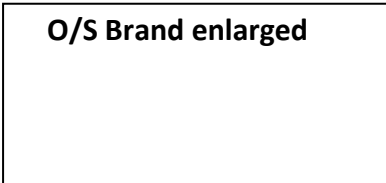
HORSE OFF SIDE VIEW



HORSE NEAR SIDE VIEW



O/S Brand enlarged



N/S Brand enlarged



**FORE LEGS
REAR VIEW**



**HIND LEGS
REAR VIEW**



DESCRIPTION VERIFICATION STATEMENT

Written Marking Description: _____

Written Brand Description: _____

I/We _____ declare that the

above is a true and accurate description of the horse named on this Application for Registration. Should this information be incorrectly provided by me to the Registrar I understand a Correction Fee will be applied to bring the Registration Certificate into order .

SIGNATURE/S OF OWNER/S _____

DATE _____