



ABN 51 590 953 920

www.showhorsecouncilaust.com.au

UPDATED 31 July 2020

PAYMENT SHEET - Fees valid from 01/08/2020

(To accompany all NSH applications via email or post)

Email: rego@shca.org.au

Postal Address: NSH Registrar, PO Box 776, Richmond NSW 2753

Please select from the below options: (all fees are GST inclusive)

- | | |
|---|--------------|
| <input type="checkbox"/> New Registration | \$135 |
| <input type="checkbox"/> Priority Admin Fee (if applicable, see right) | \$50 |
| <input type="checkbox"/> Transfer (see note below) | \$85 |
| (Original Certificate of Registration <u>must be posted</u> to the office) | |
| <input type="checkbox"/> Lease | \$100 |
| <input type="checkbox"/> Late Transfer | \$100 |
| (Applies to transfers received 30 days after sale/purchase date) | |
| <input type="checkbox"/> Name Change of Horse/Pony | \$100 |
| <input type="checkbox"/> Replacement Papers | \$100 |
| <input type="checkbox"/> Correction | \$50 |

A \$50 priority administration fee will apply to **ALL NSH applications** (registrations, transfers, leases, name changes, corrections & replacement papers) lodged within **fourteen (14) days** of the closing date of entries if the transaction is required to enter the event.

All NSH applications must be submitted by **current** financial members of an SHCA club Affiliate.

Member's name:

Postal Address:

Mobile: **Email:**

SHCA Affiliate/Club: **Membership #:**

Performance Card required: (please circle) YES / NO

Required for show entries? (please circle) YES / NO **Which show?**

PAYMENT DETAILS

Payable to The Show Horse Council of Australasia Inc.

DIRECT DEPOSIT: BSB 062 628 Account Number 0090 5955		Reference: Owner and/or Horse Name
CREDIT CARD PAYMENT OPTION (please select)		Mastercard <input type="checkbox"/> Visa <input type="checkbox"/>
AMOUNT: \$		
C/C NUMBER:	EXPIRY DATE:	CCV:
CARDHOLDERS NAME:		
CARDHOLDERS SIGNATURE:		
OFFICE USE:		

Date Application Received:

Payment Date & Receipt Number:

Registration Number Issued:

NATIONAL SADDLE HORSE REGISTER APPLICATION FORM – NEW REGISTRATION

Name of Horse/Pony (Please provide **3 names** in order of preference. If the first name preference is unavailable, the second will be issued if available etc.)

1.

2.

3.

Please be aware that initials are not accepted as a prefix or suffix to differentiate a horse's name if the first preference is unavailable. Example – if you nominate 'Show Horse' as your first name preference and it is unavailable you cannot nominate 'SH Show Horse' or 'Show Horse SH' as your second or third preference.

Existing stud prefixes/suffixes and business brands are accepted.

Use of initials for a new horse/pony registration for other purposes other than differentiating a name which has already been issued is at the discretion of The Show Horse Council of Australasia Inc.

Name of Breeder (if known) **Is this horse registered with any other Society?** Y / N

If yes, which Society? **Registered Name:**

Details of Horse/Pony

FOALING DATE/DOB: MANDATORY Mare ☐ Gelding ☐ Entire ☐

Sire:

Dam:

Colour: **Approximate Height:**hh

Microchip Number (15 digits) MANDATORY – the registration will not be completed without one.

I/We hereby make application to register a horse and certify that the details supplied on this form are true and correct in every way following a virtual inspection of the horse. I/We agree to be bound by the Rules, Regulations, By-Laws and conditions of The Show Horse Council of Australasia Inc.. I/We declare that the names of owners appearing on the form fully disclose the true and accurate ownership (refer NSH Registration Rules) of the horse described on this form. If any incorrect information be furnished on this National Saddle Horse Register Application Form, The Show Horse Council of Australasia Inc. may cancel the registration and may discipline the applicant/s and may also disqualify the horse.

Owner Name/s:

1).....

2).....

3).....

Postal Address:

Suburb: **Postcode:**

Mobile: **Email:**

Signature/s of owner/s:

Date:

Once completed, submit your application to the NSH Registrar via email or post using the details below:

NSH Registrar, The Show Horse Council of Australasia Inc.

PO Box 776, Richmond NSW 2753

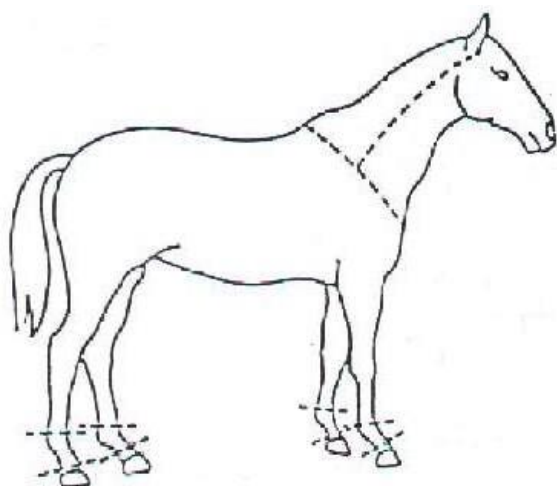
Phone: 02 4588 5005 Email: rego@shca.org.au

Website: www.showhorsecouncilaust.com.au

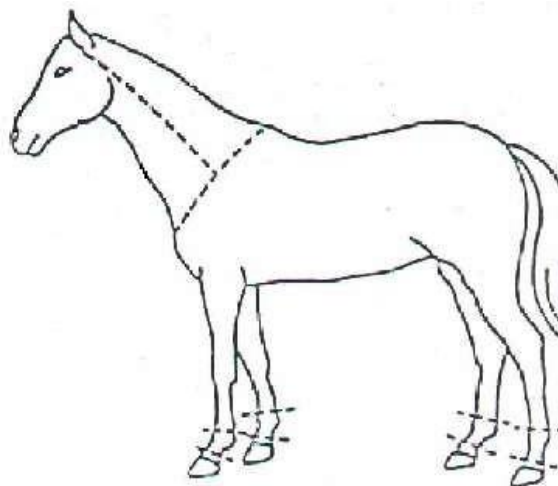
Horse Identification

Clearly draw all/any brands and white markings on the diagrams below ascertained from a visual inspection of the horse as well as a complete written description below.

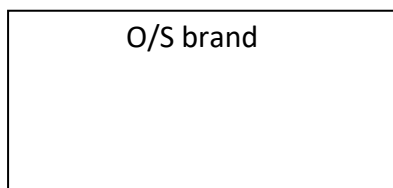
Off-side (O/S) view



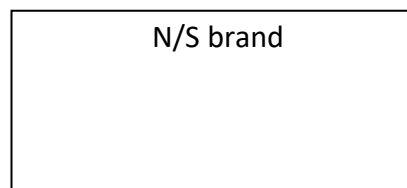
Near-side (N/S) view



O/S brand



N/S brand



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 NSH 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: