

Tiger Horse Association Inc.

Office of the Treasurer
2906 Sandy Level Road
Goodview, VA 24095

Application for Registration

Please complete as much information as possible



Application for Full Registration []
Application for Provisional Registration []
DNA Typing Kit []

Date foaled: _____

Check one: Stallion [] Mare [] Gelding []

Name of Breeder: _____

Breeder's Address: _____

SIRE _____

Name of Owner _____

Address _____

Reg. No. of Sire _____

GRANDSIRE

by _____

SIRE'S DAM

by _____

Name of This Entry

1st Choice _____

2nd Choice _____

3rd Choice _____

by _____

DAM _____

Name of Owner _____

Address _____

Reg. No. of Dam _____

by _____

2ND DAM

by _____

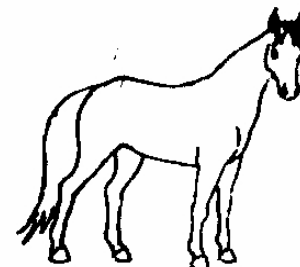
3RD DAM

Be sure to include the following with your completed application and fee:

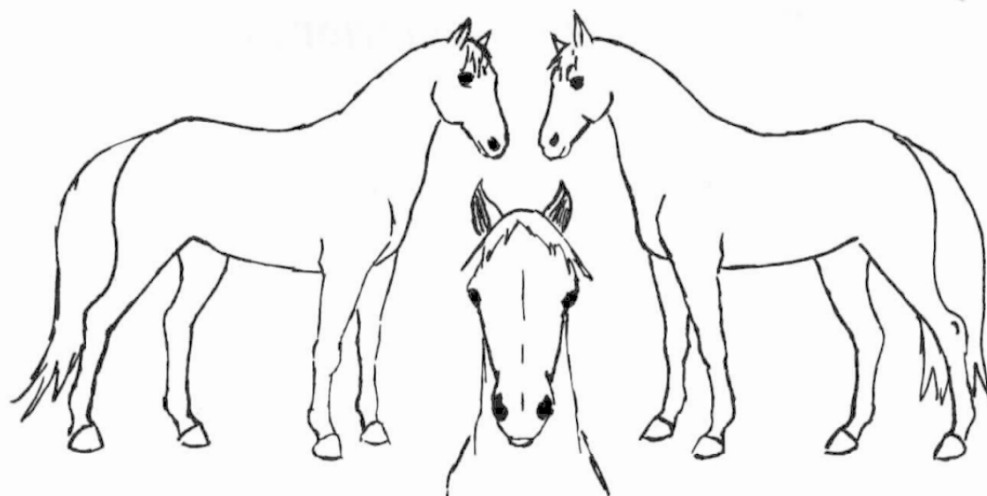
VHS, VHSC, or DVD video of horse displaying a four-beat gait.

Photo copies of registration certificates from other registries.

A single still photo of the horse being registered, (NOT a Polaroid or photocopy). The photograph must show all four legs of the horse and the face, clearly showing all face and leg markings (see sample pose to the right). A dark horse should be shown against a light background, and a light horse against a dark background. This photograph will be put on the registration certificate for identification purposes, and should be as clear as possible.



Sample of pose needed in registration photo



Give color patterns and all markings **ACCURATELY**. This is **absolutely essential** as a means of **identification**.

If the horse has no face or leg markings write none in the space for markings.

BASE COLOR _____ COAT PATTERN _____

MARKINGS _____

Check all of the following that apply: White Sclera right eye left eye;
Mottled skin nose/mouth around eyes anus/genitals; Striped Hooves LF RF LR RR

To Registrar, Tiger Horse Association Inc., I submit the above horse for registration, and certify that all information given is correct to the best of my knowledge and belief.

OWNERS NAME and MEMBERSHIP NUMBER (Please Print or Type)

ADDRESS

CITY, STATE, ZIP

OWNERS SIGNATURE & DATE

Phone _____ Fax _____ email _____

Mail completed application and all supporting documentation with appropriate fees to: Tiger Horse Association, Office of the Treasurer, 2906 Sandy Level Road, Goodview, VA 24095. Make all checks payable to : Tiger Horse Association.

Registration Fees	
Provisional & Regular	\$25.00
DNA Typing Kit	\$40.00