

FALABELLA MINIATURE HORSE ASSOCIATION

33222 N. Fairfield Road
Round Lake, IL 60073-9636 U.S.A
Phone: 1-847-404-6201

PURE FALABELLA REGISTRATION APPLICATION

INSTRUCTIONS- READ CAREFULLY- TYPE or PRINT IN CLEAR, BOLD LETTERS.
FMHA FALABELLA REGISTRATION REQUIRES HAVING TWO PURE FALABELLA PARENTS.
SEE REVERSE SIDE FOR FMHA REGISTRATION REQUIREMENTS and FEE'S.

NAME OF HORSE _____
Name not to exceed 35 letters & spaces. The word "Falabella" may not be used in name of horse.

SEX _____ BIRTH DATE _____ PERMANENT HEIGHT _____
Month Day Year at 3 years or older

COLOR _____ MANE & TAIL COLOR _____

MARKINGS _____

Yes, I authorize FMHA to designate the color as represented by photographs.

IMPORTANT: HEIGHTS ARE REQUIRED ON SIRE AND DAM

SIRE NAME _____ REG # _____ HEIGHT _____

DAM NAME _____ REG# _____ HEIGHT _____

BREEDERS NAME AND ADDRESS
(Owner of dam at time of service)

Name _____

Address _____

City/State/Zip _____

OWNERS NAME AND ADDRESS
(Owner of dam at time of foaling)

Name _____

Address _____

City/State/Zip _____

Phone: _____

Signature _____

(Owner or Authorized Agent on foaling date)

SERVICE CERTIFICATE

If you did **NOT** own BOTH sire and dam at time of service, complete the section below.

I certify my Stallion named _____ Reg # _____ Height _____

bred the mare named _____ Reg # _____ Height _____

Breeding Dates _____ Year _____

SIGNATURE of Stallion Owner or Authorized Agent _____ Date _____

PRINT: Stallion owner name _____ Address _____

City/State/Zip _____ Phone _____

Country _____ E-Mail _____

This Form May Be COPIED, or DOWNLOADED From FMHA at: www.falabellafmha.com/forms.htm