

## **Application to Register a Horse**

AME:				
BIRTH YEAR:	_ AGE: yrs. BREED	MARE/GE	MARE/GELDING:	
COLOUR:	BRAND:	HEIGHT: _	hh	
MICROCHIP:				
MARKINGS:				
RIDER:				
NAME:	MEMB.N	IO:BIRTH DATE	<b>=</b> :	
ADDRESS:				
POSTCODE:	TEL.NO/S:			
CLUB:		ZONE:		
OWNERSHIP:  OWNER'S NAME:				
LEASED FROM:				
Please indicate the card/s	s required :			
Showjumping		Combined Training	g	
ODE		Dressage		
Has the horse previously bee	n registered with PCQ?	Yes No or EFA	Yes No	
If so, existing PCQ card nur	mbers and/or current EA	grading		

Please complete all sections of this form and email as an attachment to <a href="mailto:admin@ponyclubqld.com.au">admin@ponyclubqld.com.au</a> or return to PCQ, PO Box 293, Northgate, 4013

Cards are \$6 per Discipline and will be posted out upon payment which can be made by Direct Deposit or Credit Card.

Pony Club Assn of Queensland Inc.

BSB 084 - 034

ACC 87-730-5062

Ref: Horse Reg & Surname