

IMPORTANT
(See Other Side)



P O Box 1046
Shelbyville TN 37162
931-684-7496

INSPECTED BY
NAME and INSPECTORS #

Print: _____

Signature: _____

SOLID or SPOTTED

APPLICATION FOR REGISTRATION

Date of Service _____

Foaled _____

SIRE _____

Sig. of Owner _____
(At Time of Service)

Reg. # of Sire _____

*NOTE: If Sire is registered with another organization other than SSHBEA, a copy of those papers must be submitted with this application.

NAME OF THIS ENTRY (Maximum of 25 characters including spaces and apostrophe)																									
1st Choice																									
2nd Choice																									
3rd Choice																									

DAM _____

Sig. of Owner _____
(At Time of Service)

Address _____

Reg. # of Dam _____

*NOTE: If Dam is registered with another organization other than SSHBEA, a copy of those papers must be submitted with this application.

}	by 1) _____	}	by 3) _____	}	by 7) _____
	2) _____		4) _____		8) _____
}	by 5) _____	}	by 11) _____	}	by 13) _____
	6) _____		12) _____		14) _____
}	by 1) _____	}	by 3) _____	}	by 7) _____
	2) _____ 2nd Dam		4) _____		8) _____
}	by 5) _____	}	by 11) _____	}	by 13) _____
	6) _____		12) _____		14) _____

"SSHBEA Secretary, I submit the above for registration and certify that it is correct to the best of my knowledge and belief."

Owner Signature _____ SSHBEA ID# _____

Print Name _____

Mailing Address _____

Date of Application _____ Phone # _____ Email _____

(Leave Blank)

**Registration will NOT be made unless fee is paid.
Send money order, bank draft, or personal check.**

