



Mountain Pleasure Horse Association

P.O. Box 5, Jeffersonville, KY 40337

606-359-3000

Purebred Registration Application

(Please print this page and fill in the following information to register a horse)

**You must be a current MPHA member in good standing to register a horse*

Horse Name Choices 1) _____

Must be less than 30 characters 2) _____

List in preferred order 3) _____

Sex	Height	Color	Date Foaled

Sire	Sire of Sire
	Dam of Sire
Dam	Sire of Dam
	Dam of Dam

Owner of Dam at time this horse was foaled	
Current owner of the horse to be registered	
Owner's address	
Owner's email	
Owner's phone	
Current location of the horse to be registered if different from above	

The undersigned owner or authorized agent certifies that he/she has full power and authority to execute and file this application and to receive any requested or related documents from the MPHA, and that the information supplied on this form is complete and correct. The undersigned also agrees that the MPHA may act with respect to the horse referred to herein on the basis of this application, other documents on file with respect to this horse, and other information available to the MPHA, and that in cases of inconsistent data, the MPHA shall be under no liability to the undersigned in connection with such action. The undersigned also certifies that he/she has read and understands the Rules of Registration of the MPHA and that he/she agrees to comply with such rules.

Signature Printed Name Date

Mail form and payment to:
Mountain Pleasure Horse Association
P.O. Box 5, Jeffersonville, KY 40337



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PLEASE DRAW IN MARKINGS ON THE ABOVE HORSES AND DESCRIBE IN THE AREA AT RIGHT. INCLUDE FOUR PHOTOS, FRONT, BACK, AND BOTH SIDES.



HEAD MARKINGS: _____

BODY MARKINGS: _____

LEG MARKINGS:
LEFT FORE: _____

RIGHT FORE: _____

LEFT HIND: _____

RIGHT HIND: _____

