



AUSTRALIAN HAFLINGER HORSE BREEDER'S ASSOCIATION

INCORPORATED IN NEW SOUTH WALES

4, EMILY ROAD, MT VINCENT, NSW 2323. TEL: 02 4938 0333. FAX: 02 4938 0512

THE REGISTRAR

**HORSE TRANSFER
OF OWNERSHIP FORM**

PLEASE SEND FORM TO THE REGISTRAR WITH THE HORSE'S ORIGINAL REGISTRATION CERTIFICATE

NAME AND ADDRESS OF VENDOR _____

_____ **POSTCODE** _____

NAME AND ADDRESS OF PURCHASER _____

_____ **POSTCODE** _____

NAME OF HORSE _____

REGISTRATION NUMBER OF HORSE _____

DATE OF TRANSFER _____

TRANSFER FEE \$ _____ (VENDOR PAYS)

I AUTHORISE THE REGISTRAR OF THE ASSOCIATION TO RECORD THE ABOVE TRANSFER OF OWNERSHIP IN THE STUDBOOK

SIGNED BY VENDOR _____ **DATE** _____

OR AUTHORISED REPRESENTATIVE