Single-Footing Horse Owners and Breeders Association

943 Skitts Mountain Road, Cleveland, GA 30528

706-969-6224

Registration Application

Sex of Horse to be Registered

- ☐ **Stallion**
- ☐ **Mare**
- ☐ **Gelding**

Breeding Information

Date of Service_____

Foal Date_____

For Office Use Only

Registration #

_____

Date Completed

_____

Name Choices of Horse to be Registered

1st Choice ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

2nd Choice ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

3rd Choice ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Sire & Dam Information:

Sire's Registered Name_____

Registration #_____

Owner of Sire_____

Dam's Registered Name_____

Registration #_____

Owner of mare at Time of Breeding_____

Address: City_____State_____

Color of Horse to be Registered (Select all that apply)

- ☐ Bay ☐ Black ☐ Sorrell
- ☐ Chestnut ☐ Buckskin ☐ Palomino
- ☐ Grey ☐ Dun ☐ Cremello
- ☐ White ☐ Brown ☐ Chocolate
- ☐ Grulla ☐ Champagne ☐ Other _____
- ☐ Roan (Please select base color above)
- ☐ Spotted (Please select base color above)

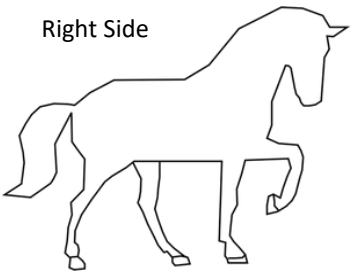
Mane/Tail Color

_____

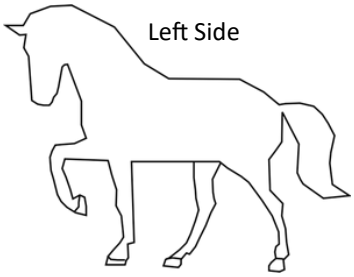
Body Markings: Please draw in all white markings on the diagrams below.

If the horse has no markings check the box for none. ☐ **NO MARKINGS**

Right Side



Left Side



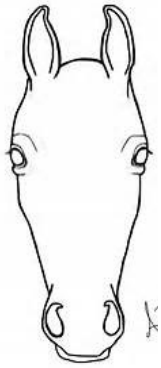
Describe Markings

_____

_____

_____

_____



Describe any Brands, Tattoos, Scars, Whorls

_____

_____

Owner/Applicant _____

Address_____

_____

Phone Number_____

Email_____

Date of application_____