



EQUESTRIAN FEDERATION OF JAMAICA  
 c/o 6<sup>th</sup> Floor, ICWI, 2 St. Lucia Ave. Kingston 5, Jamaica.

**HORSE REGISTRATION FORM**

OWNER INFORMATION			
NAME: LAST	FIRST	M.I.	GENDER: MALE <input type="checkbox"/> FEMALE <input type="checkbox"/>
DATE OF BIRTH / /	EFJ MEMBERSHIP NUMBER:		
ADDRESS:	CITY:	PARISH:	
EMAIL ADDRESS:	PHONE NUMBER: ( ) -		
HORSE INFORMATION			
NAME OF HORSE:		AKA/NICKNAME:	
HEIGHT: PONY: <input type="checkbox"/>	HORSE: <input type="checkbox"/>	HEIGHT: HH	DATE OF BIRTH: / /
BREED:	SEX:	SIRE:	DAM: COLOUR:
CURRENT EQUINE FLU VACCINATION:		VET:	DATE GIVEN:
<b>NB: If a horse is measured with shoes ½" is deducted from that measurement which will be considered the official height of the horse. All horses require re measurement at 6 years old, with exceptions to those under 15.2hh.</b>			
SIGNATURE AND STAMP OF VETERINARIAN: Please print name and signature		SIGNATURE:	DATE: STAMP:
NAME OF LOCAL STABLE:		EFJ REGISTRATION #:	DATE.:
<u><b>REGISTRATION FEE: JMD \$1,5000 PER HORSE</b></u>			

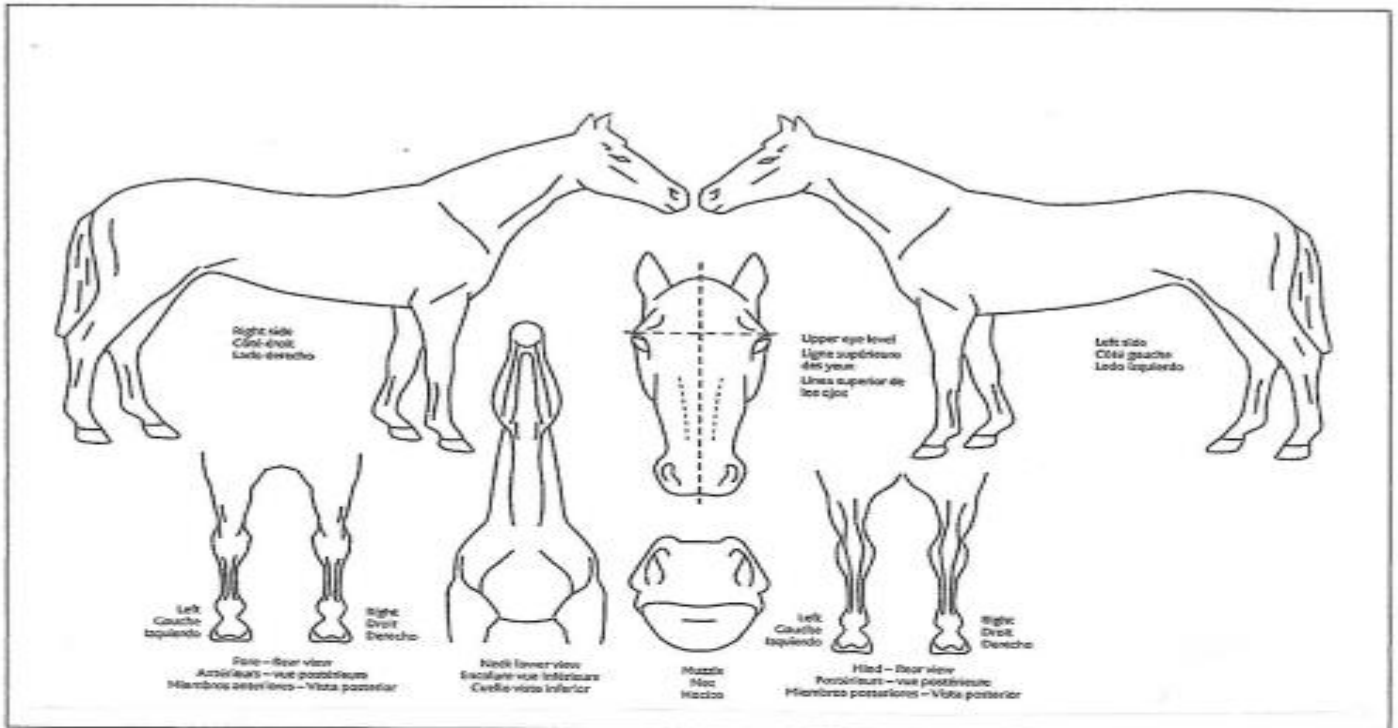
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 SIGNATURE OF REGISTRATION SECRETARY

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 DATE RESIGTERED  
 (OFFICAL USE ONLY)



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### HORSE IDENTIFICATION DIAGRAM



**MARKINGS**  
 WHITE MARKINGS OF HORSE TO BE SHOWN IN INK ON DIAGRAM. PLEASE ENSURE THAT DIAGRAM AND WRITTEN DESCRIPTION AGREE. IN THE EVENT OF NO MARKINGS INSERT 'NIL'

HEAD		BODY	
LEFT/NEAR SIDE FORELEG		LEFT/NEAR SIDE HINDLEG	
RIGHT/OFF SIDE FORELEG		RIGHT/OFF SIDE HINDLEG	
NAME OF HORSE			REGISTRATION NO.