



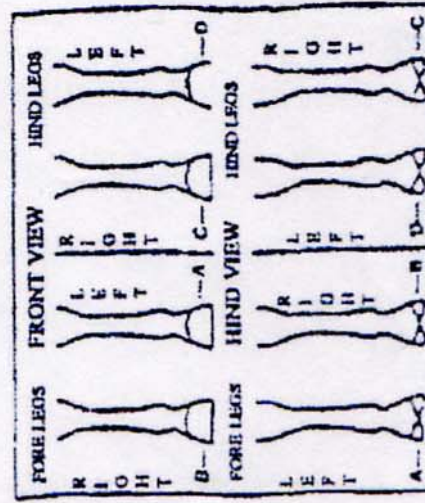
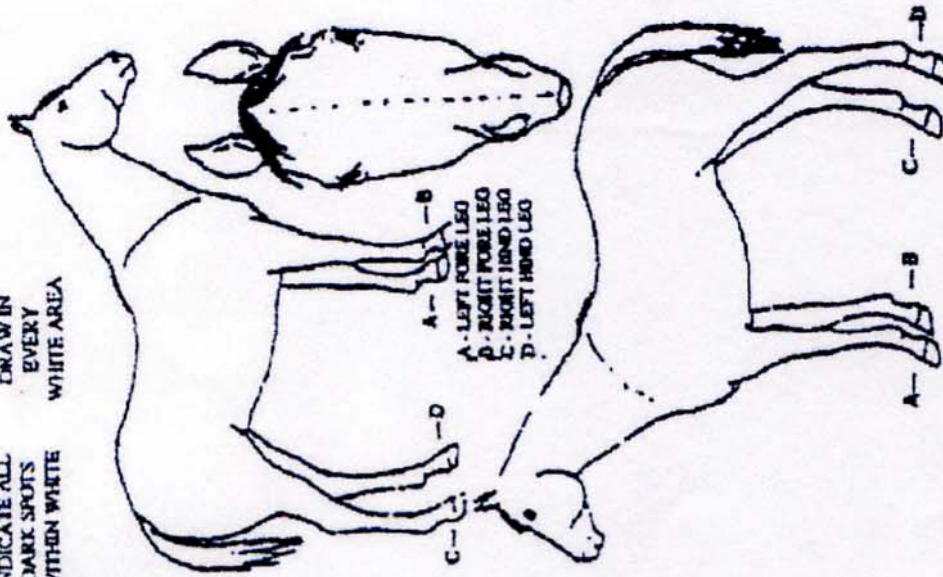
**REGISTRATION APPLICATION**  
**NATIONAL QUARTER PONY ASSOCIATION, INC**

PO Box 171 Melrose, Ohio 45861

Please allow 6-8 weeks for processing

INDICATE ALL  
DARK SPOTS  
WITHIN WHITE

DRAW IN  
EVERY  
WHITE AREA



NAME OF PONY \_\_\_\_\_ AQHA REG # \_\_\_\_\_

(not to exceed 20 letters and spaces, no punctuation) Please enclose a copy of AQHA papers both sides; if applicable

MARE ( )

STALLION ( ) FOALED \_\_\_\_\_ STATE WHERE FOALED \_\_\_\_\_

GELDING ( )

COLOR \_\_\_\_\_ COLOR OF MANE & TAIL \_\_\_\_\_

MARKINGS \_\_\_\_\_

SIRE \_\_\_\_\_ N.Q.P.A.# \_\_\_\_\_ AQHA# \_\_\_\_\_

Owner of Sire at Time of Service \_\_\_\_\_ Address \_\_\_\_\_

DAM \_\_\_\_\_ NQPA# \_\_\_\_\_ AQHA# \_\_\_\_\_

Owner of Dam at time of Foaling \_\_\_\_\_ Address \_\_\_\_\_

Signature of Owner \_\_\_\_\_ Telephone( ) \_\_\_\_\_

email \_\_\_\_\_ Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZipCode \_\_\_\_\_

MEMBERSHIP FEES	REGISTRATION FEES	REGISTRATION FEES (non-members)
Individual-Annual \$15.00	Tentative Registry (0-5 yrs) \$25.00	Tentative Registry(0-5 yrs) \$40.00
Family- Annual \$25.00	Advancement (age 6) \$10.00	Advancement (age 6) \$25.00
Individual-Lifetime \$150.00	Permanent Registry (6+ yrs) \$35.00	Permanent (6+ yrs) \$50.00
	Hardship Registry \$50.00	Hardship Registry \$65.00

If registering Hardship please enclose 4 pictures of the animal, front;back; and both sides

Instructions: Important Accurately kept private records are essential, and in any case where an application is regarded as questionable, the burden of proof with regard to same shall rest upon the applicant who must sustain his claims by a preponderance of evidence

<b>1st Sire</b>	<b>GRANDSIRE</b>
<b>NAME OF PONY TO BE REGISTERED</b>	<b>GRANDDAM</b>
<b>1ST DAM</b>	<b>GRANDSIRE</b>
	<b>GRANDDAM</b>

FOR OFFICE USE ONLY

BLOODLINES APPROVED \_\_\_\_\_  
COMMENTS \_\_\_\_\_

SPACE BELOW FOR INSPECTORS REPORT ONLY

HEIGHT \_\_\_\_\_ INCHES \_\_\_\_\_

IF MEASURED BY A VETERINARIAN PLEASE WRITE/ATTACH THE IDENTIFACATION # \_\_\_\_\_

DATE \_\_\_\_\_ APPROVED \_\_\_\_\_ NOT APPROVED \_\_\_\_\_

SIGNATURE (NEED 3 TO APPROVE) \_\_\_\_\_

REGISTRATION NUMBER \_\_\_\_\_

DATE \_\_\_\_\_