INTERNATIONAL BUCKSKIN HORSE ASSOCIATION, INC. – TEMPORARY Registration Application

SECTION ONE: Give three name choices not to exceed 20 letters and spaces.

NAME (_____)(_____)(_____)
First Choice Second Choice Third Choice

BODY COLOR_____ MARE ( ) STALLION ( ) GELDING ( ) FOALED (_____)(_____)(_____)(_____)
(Buckskin, Grulla, Red Dun, Dun) Month Day Year State Foaled

HEIGHT_____ WEIGHT_____ EYES_____ Do eyes show white sclera? _____ HOOFS_____
(Hands) (Approximate) (Color) (Yes or No) (Solid or Striped)

DORSAL STRIPE?_____ SHOULDER STRIPE?_____LEG BARRING?_____

COLOR OF MANE?_____COLOR OF TAIL?_____

Description of White Markings, Scars and Brands_____

_____

SECTION TWO:

SIRE: _____REG. NO._____WHAT REGISTRY?_____

COLOR OF SIRE:_____

DAM:_____REG. NO._____WHAT REGISTRY?_____

COLOR OF DAM:_____

BREEDER:_____IBHA ID#_____
(OWNER OF DAM AT TIME OF BREEDING)

CITY: _____ STATE: _____ZIP:_____

SECTION THREE:

- I understand that final IBHA registration acceptance is pending, subject to the approval of the IBHA Registration Committee.
- The signature of the Authorized Show Personnel below in no way creates any liability regarding the determination of the temporary registration application.

_____
(Signature of Owner of Horse) (IBHA ID #) (Print Name Here)

_____
(Address)

_____
(City) (State) (Zip)

Phone #: (_____)_____Cell#(_____)_____

XXX _____
(Signature of Authorized Show Personnel)

FOR OFFICE USE ONLY

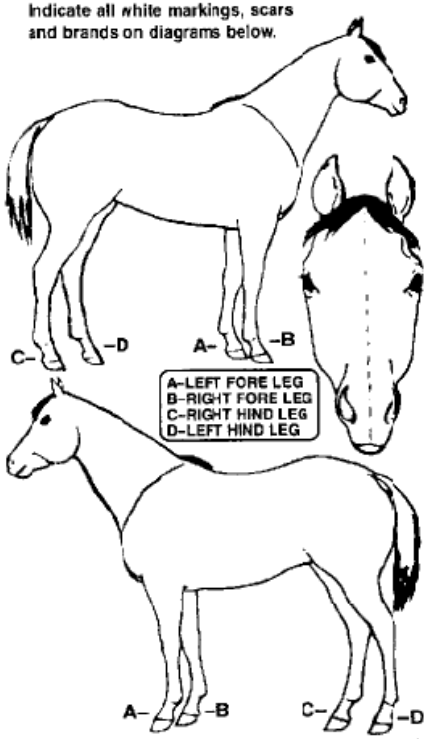
REG. NO._____

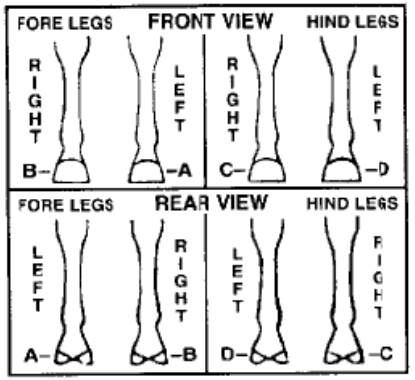
DATE_____

ID#_____

***SHOW GROUNDS APPLICATION**
This application is taken in good faith that the described horse is IBHA eligible. Final IBHA registration is pending, subject to IBHA Registration Committee approval.

Indicate all white markings, scars and brands on diagrams below.





SEE OTHER SIDE !