



STALLION UPGRADE FOR BREEDING

NAME OF STALLION: REGN NO.....

STALLION OWNER:

ADDRESS:

TOWN: STATE: POSTCODE:

TELEPHONE: MOBILE:

EMAIL:

In order for your stallion to be registered for breeding purposes, the following must be received in the PHAA Office.

1. Parentage DNA PV test must be completed and on file with the PHAA before the stallion is used for breeding purposes. The DNA fee is to be paid to the PHAA office in advance or with this application. A DNA kit will be forwarded once this fee is paid.
2. Veterinary certificate (attached) completed by a qualified veterinarian.
3. The colt registration papers for horse to be upgraded (a new set will be issued once upgraded).
4. Two recent photos near and off side. (Four photos if previously unregistered).
5. Registration form and registration fee if not previously registered
6. Upgrading fee of \$520 must accompany the application (if Parentage DNA)
7. Combined Upgrade fee and Parentage DNA fee (\$635) OR Combined upgrade fee and Parentage DNA fee must accompany the application (if Parentage DNA not completed)

***** ANY COLT USED FOR BREEDING PURPOSES BEFORE BEING UPGRADED WILL INCUR A PENALTY FEE OF \$2,420. ANY RESULTING FOALS WILL NOT BE REGISTERED UNTIL THIS PENALTY FEE IS PAID.**

☐ **Upgrade fee only** (Does not include DNA-PV) **\$520***

*** If DNA-PV fee has already been paid please quote receipt number for verification:**

Rec No..... Dated.....

☐ **Upgrade fee + DNA-PV** **\$635**

☐ **Additional Genetic test requests** **Please complete attached form if required**

PAYMENT I enclose cheque / money order / credit card details for \$

Visa / MasterCard (Please Circle)

Card No ____ / ____ / ____ / ____ Expiry Date ____ / ____

Name on Card:

Please note – Credit card payments will attract a 2.00% Merchant fee.

Signature: Date:



VETERINARY CERTIFICATE For Stallion Upgrade Only

Owners Name:

Address:

..... **Membership No:**

Horse Name: **Registration No:**

Colour: **Coat Pattern:** **Age:**.....

Height: *Minimum height for all horses for stallion upgrade - 14 hh at the withers*

Severe Hereditary Deformities: Yes / No

If Yes please describe:

Extreme parrot mouth: Yes / No

Does this horse singlefoot or pace? Yes / No

Both testicles fully descended & even in size Yes / No

Cryptorchidii Yes / No

Monorchid Yes / No

NB: Stallion owners please note a cryptorchid or monorchid stallion is not eligible for upgrade.

Any apparent defects: (Please describe).....

.....

Horse identified from Certificate of Registration: Yes / No

If no please attach signed photograph or certificate of description.

TO BE COMPLETED IN FULL AND SIGNED BY VETERINARIAN

Signature: **Date :**.....
(Veterinarian)

Print name of Veterinarian:

Practice / Address:

.....

NB: Stallion owners please note a cryptorchid or monorchid stallion is not eligible for registration.

PLEASE RETURN THIS FORM TO THE PHAA OFFICE WITH THE ORIGINAL COPY OF REGISTRATION CERTIFICATE AND TWO CURRENT PHOTOS SHOWING THE HORSE DIRECTLY FROM EACH SIDE.

☐

Tick this box if you wish to have a copy of your old registration certificate returned to you.



DNA TESTING / GENETIC SCREENING REPORT REQUEST FORM

DETAILS OF HORSE TO BE TESTED

Registered name:

(If not registered please use name that is intended)

Registration Number:

Breed if not PHAA:

Date of Birth / / Sex:

Colour & Coat Pattern:

OWNERS DETAILS:

Name:.....Memb#.....

Address:

City / Town:

State: Postcode:

Phone:

EMAIL:

☐ PLEASE SEND KIT VIA EMAIL

☐ PLEASE SEND KIT VIA POST

PHAA ONLY

For DNA-PV please return

Original Registration Certificate

plus 2 recent photographs of the horse to be tested.

TESTS REQUESTED

- | | |
|--|-------|
| <input type="checkbox"/> Non PHAA Member Admin Fee | \$ 35 |
| <input type="checkbox"/> DNA Parent Validation* | \$110 |
| <input type="checkbox"/> DNA Parent Validation* + 1 gen test | \$120 |
| <input type="checkbox"/> DNA Parent Validation* + 2 gen test | \$125 |
| <input type="checkbox"/> DNA Parent Validation* + 3 gen test | \$130 |
| <input type="checkbox"/> DNA Parent Validation + 5 gen test | \$170 |
| <input type="checkbox"/> DNA Parent Validation* + 7 gen test | \$185 |

5 Panel Combined test

- | | |
|---|-------|
| <input type="checkbox"/> OLWS/HERDA/PSSM1/MH/GBED | \$115 |
| <input type="checkbox"/> Sab1/SW1/SW2/SW3/Tob | \$115 |

2 or 3 Panel Combined test (any comb)

- | | |
|--|-------|
| <input type="checkbox"/> / (any 2) | \$ 85 |
| <input type="checkbox"/> / / (any 3) | \$ 95 |

Individual tests for coat colour

- | | |
|---|-------|
| <input type="checkbox"/> CCC - Red Factor (red/black) | \$ 65 |
| <input type="checkbox"/> AG - Agouti (Bay) | \$ 65 |
| <input type="checkbox"/> CD - Cream Dilution | \$ 65 |
| <input type="checkbox"/> Prl - Pearl | \$ 65 |
| <input type="checkbox"/> Champagne | \$ 65 |
| <input type="checkbox"/> Silver | \$ 65 |
| <input type="checkbox"/> Dun | \$ 65 |

Individual tests for coat pattern

- | | |
|---|-------|
| <input type="checkbox"/> OWLS (Overo) | \$ 65 |
| <input type="checkbox"/> Tobiano | \$ 65 |
| <input type="checkbox"/> Sabino 1 | \$ 65 |
| <input type="checkbox"/> Splashed White 1 | \$ 65 |
| <input type="checkbox"/> Splashed White 2 | \$ 65 |
| <input type="checkbox"/> Splashed White 3 | \$ 65 |

Individual tests for genetic conditions:

- | | |
|--------------------------------|-------|
| <input type="checkbox"/> HYPP | \$ 65 |
| <input type="checkbox"/> HERDA | \$ 65 |
| <input type="checkbox"/> MH | \$ 65 |
| <input type="checkbox"/> GBED | \$ 65 |
| <input type="checkbox"/> PSSM1 | \$ 65 |

HORSE PARENTAGE DETAILS (must be completed)

SIRE NameRegistration No.....

Sire Breed Colour & Coat Pattern

DAM NameRegistration No.....

Dam Breed Colour & Coat Pattern

- ☐ I/we have paid \$..... for above fees by direct deposit - **Date of deposit** ____ / ____ / ____
BSB: 062 534 A/C No: 1025 3938 A/C Name: Paint Horse Association of Aust.

- ☐ I/We enclose cheque / money order / credit card details for \$..... for above fees.

Credit Card Payments - will attract a 2.00% Merchant fee.

VISA / MASTERCARD (Please Circle) Card No ____ / ____ / ____ / ____

Name on Card Expiry Date ____ / ____

Signature: Date:.....



**PAINT HORSE
ASSOCIATION
OF AUSTRALIA**

Paint Horse Association of Australia Ltd

PO Box 1008, Dubbo NSW 2830

Phone: 02 6884 5513

Email: office@painthorse.net.au

Web: www.painthorse.com.au

ABN: 43 003 155 691

Stallion Upgrade Checklist

DNA and GENETIC TESTING REQUEST FORM:

Once received by the office we will send you a Genetic Test Kit for you to attach your Stallions hair sample to with a Reply Paid address for the Laboratory and a Statutory Declaration Form to be returned to us.

For STALLION Upgrades (Already registered colts)

The following information should be returned to the **PHAA office:**

- ☐ Completed Stallion Advance form
- ☐ Completed Genetic Testing form (if appropriate)
- ☐ Completed Veterinary Certificate (for Stallion Upgrade)
- ☐ Originals of colt / stallion registration papers
- ☐ Two (2) current photos of stallion directly from each side (if already registered)
- ☐ Appropriate fees

For previously unregistered STALLIONS

The above plus the following should be returned to the **PHAA office:**

- ☐ Completed Registration Application form together with relevant documentation, including photographs and appropriate fees