VIRGINIA PONY BREEDERS ASSOCIATION
Application for Registration
1612 Shallowall Road, Manakin Sabot, VA 23103* 540/338-3528

For office use ________________________________	________

Registration Qualifications: Pony must be owned by a member of the Virginia Pony Breeders Association. Pony must be foaled in the State of Virginia out of a mare stabled in Virginia for 6 months from time of service to time of foaling. A **Stallion Service Certificate** issued by the owner or authorized agent of the stallion (or a notarized copy of registration papers issued by a breed organization) must be attached at the top of the reverse side. Stallion Agent Authorization must be on file in VPBA office. See VPBA Directory for Embryo Transfer requirements.

REGISTRATION FEE: $20 **PLEASE PRINT CLEARLY**

REQUESTED NAME: |__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|__|

CIRCLE PONY'S SEX: Colt Gelding Filly **FOALING DATE:** _____/_____/_____
M D Y

COLOR AT MATURITY:______________________________ **COLOR AT BIRTH** (if different): ____________________

SIRE: ____ **BREED:** _____________________**VPBA#:** _________

By:____ Out of: _______________________________________

Sire's Owner: ____

Address: ____ Phone # : _______________________

City: ____ State: ________________ Zip: ____________

DAM: ____ **BREED:** _____________________ **VPBA#:** __________

By:____ Out of: _______________________________________

When applicant pony was foaled, its dam was:

☐Owned by Breeder ☐ Leased/Borrowed by Breeder ☐ Don't Know

(Breeder = owner or lessee of mare at time applicant pony was foaled.)
If dam is leased/borrowed, a copy of the lease or a written statement from the owner of the dam must accompany this Application unless lease/statement is currently on file with VPBA.

LOCATION OF DAM'S 6 MONTHS VIRGINIA RESIDENCY: ____

LOCATION WHERE APPLICANT PONY WAS FOALED: ☐ Same as Dam Residency ☐ Other

Complete Address ____

BREEDER (owner or lessee of mare at time applicant pony was foaled):

Name: ____ Email: ______________________________

Address: ____ Phone # : _______________________

City: ____ State: ________________ Zip: ____________

OWNER OF APPLICANT PONY: Must be current VPBA member. ☐ Same as Breeder

Name: ____ Email: ______________________________

Address: ____ Phone # : _______________________

City: ____ State: ________________ Zip: ____________

DESCRIPTIONS ON REVERSE SIDE MUST BE COMPLETED
Attach Stallion Service Certificate at tip of reverse side.

To the best of my knowledge and belief, all information on this application is true and accurate.

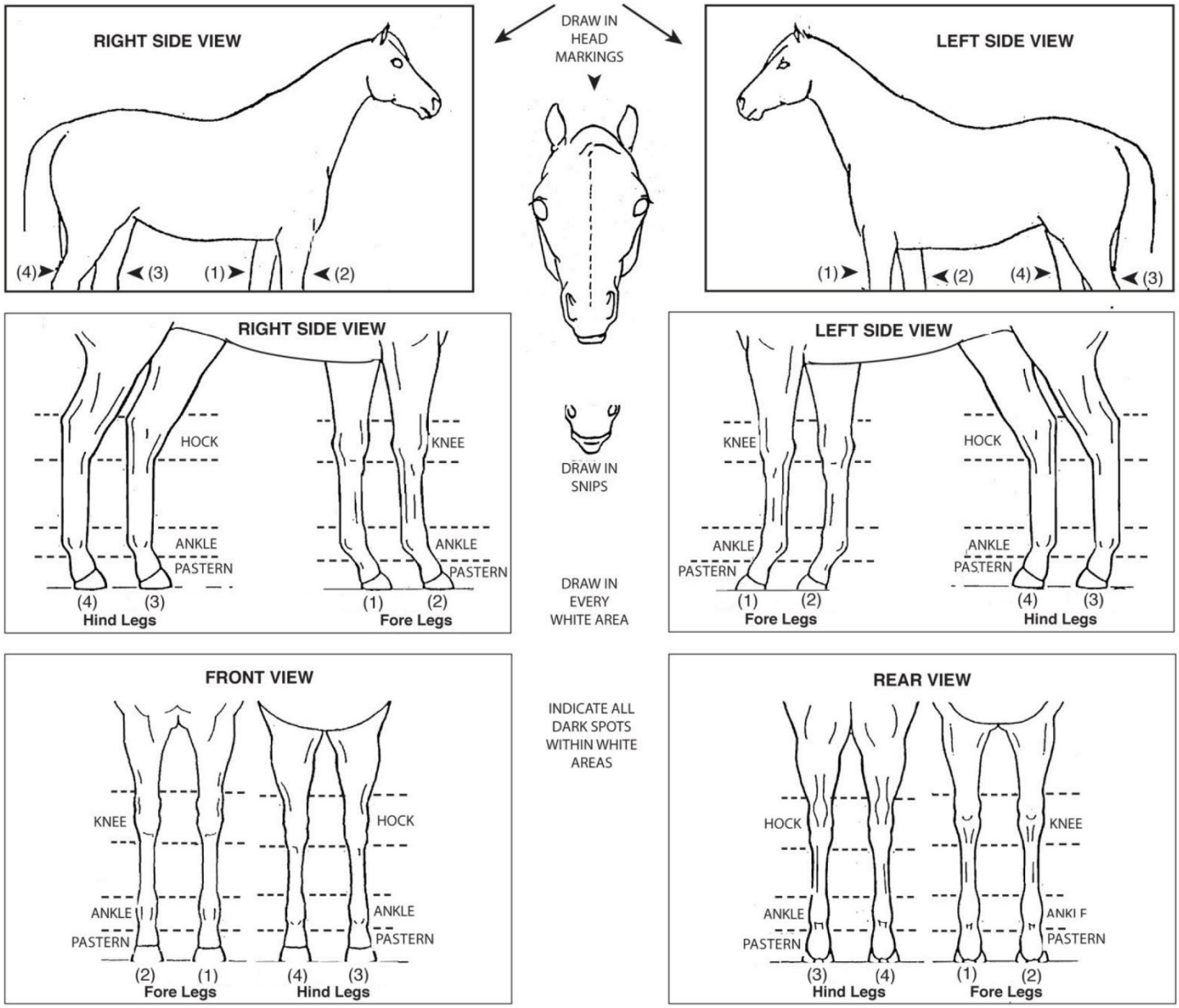
Signature of ☐ Owner ☐ Agent ____ Date: ____/____/____

Printed Name of Owner or Agent ____ Registration Fee: $20

Registrar's Phone: **(804) 784-5441** Email: **grpresson399@gmail.com**

Attach Stallion Service Certificate Here

Draw in all head and body markings. Draw in all leg marking from the 4 different views. If a leg marking is higher in one view than another, indicate such. The view of each leg must be complete and consistent, i.e. (1) is always the left foreleg, and (4) is always the right hind leg. Leg numbers in the drawing correspond to the numbered lines below in the written section. Check the box if there are no markings.



BRIEFLY DESCRIBE MARKINGS to help interpret drawings above. Check here if NO MARKINGS ☐

HEAD MARKINGS: _____ NONE: ☐

(1) LEFT FORELEG: _____ NO MARK: ☐ HOOF COLOR:_____

(2) RIGHT FORELEG: _____ NO MARK: ☐ HOOF COLOR:_____

(3) LEFT HINDLEG: _____ NO MARK: ☐ HOOF COLOR:_____

(4) RIGHT HINDLEG: _____ NO MARK: ☐ HOOF COLOR:_____

OTHER OR UNUSUAL MARKINGS OR COLOR, INCLUDING EYES: _____