



APPROVED BREEDING CROSS

Sendera Draft Horse Registry
PO BOX 468
Tioga, TX 76271
TEL: (903) 883-SPOT (7768)
admin@SenderaDraft.com

This form is an application for tracking those horses requesting approval for cross breeding to Sendera Draft Horses.

This form is NOT for the registration of a Sendera Draft Horse.

Office Use Only -
Approved ____ Denied ____
DNA Tests Completed _____
Approval Type _____

PLEASE NOTE - NO Certificate of Registration will be created, only the Approved Breeding number letter will be sent to the email / mailing address listed below upon approval. If horse is denied, a denial letter will be sent.

I. NAME AS IT WILL APPEAR ON ANY SDHR PEDIGREE: (Maximum of 25 letters including spaces)

Punctuation, special characters, numbers or Roman numerals are **not** allowed.

1st																															
2nd																															

II. HORSE INFORMATION:

CITY / STATE / COUNTRY FOALED: _____ FOALING DATE: _____

REGISTRY NAME: _____ REGISTRATION #: _____

HORSE'S BARN NAME: _____ MICROCHIP #: _____

SEX: ___ Mare ___ Stallion

III. PEDIGREE:

SIRE Name: _____ Registration #: _____

Breed: _____ Color: _____

Grandsire: _____ Registration #: _____

Breed: _____ Color: _____

Granddam: _____ Registration #: _____

Breed: _____ Color: _____

DAM Name: _____ Registration #: _____

Breed: _____ Color: _____

Grandsire: _____ Registration #: _____

Breed: _____ Color: _____

Granddam: _____ Registration #: _____

Breed: _____ Color: _____

IV. OWNER OF HORSE APPLYING: (Please print as it appears on any applicable Registration Certificate)

NAME: _____ EMAIL: _____

ADDRESS: _____ CITY: _____ STATE/PROVINCE: _____

ZIP/POSTAL: _____ PHONE #: _____ SDHR MEMBERSHIP#: _____

CHECK HERE IF THIS IS A NEW ADDRESS

As owner of this horse (or authorized by said owners), I hereby certify all information on this registration is true and correct to my personal knowledge and agree the SDHR has the privilege to correct and/or cancel the registration certificate of any foals produced by this horse and registered with the SDHR for cause under its rules and regulations.

Signature Required X _____ Date: _____

V. FEE SCHEDULE: Fees subject to change. All applications received without payment will not be processed. US Funds Only.

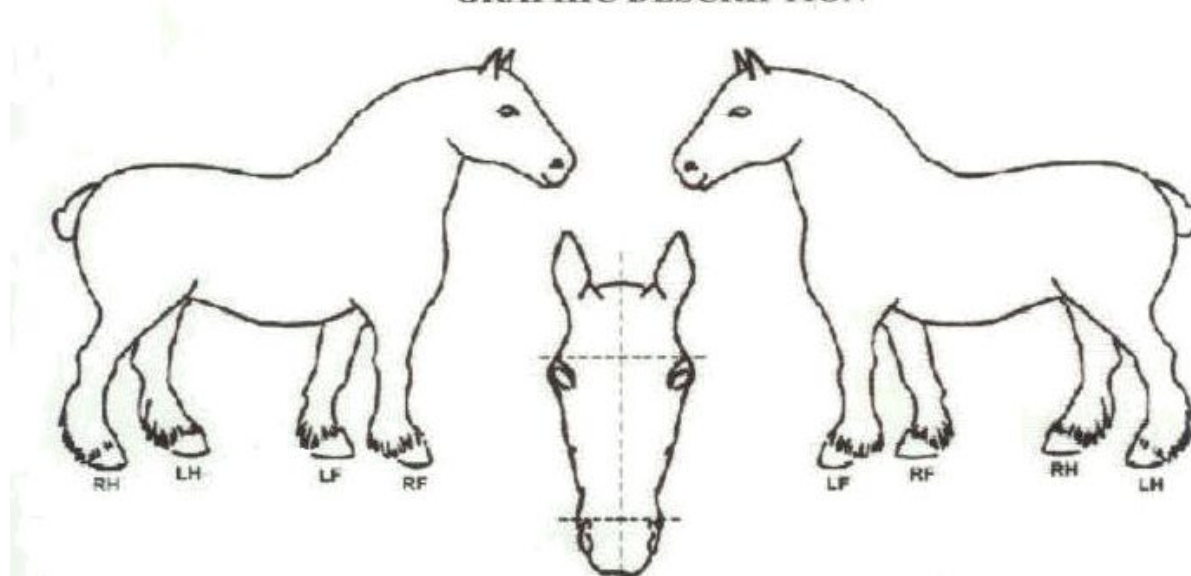
- The horse above is submitted for SDHR cross breeding approval** (Member: First Evaluation \$0, Each Additional \$15; Non-Member \$30)
 IF conformation is approved, this horse will be required to have a DNA (ISAG) profile and an equine 6 panel genetic disease test completed and on file BEFORE being granted breeding approval and registration eligibility of foals. **Depending on pedigree or presented color, the white pattern test may also be required. If DNA test results show this horse **IS NOT** a carrier of any genes deemed undesirable by the SDHR, this horse may be granted Open or General breeding status. If results show this horse **IS** a carrier, this horse may be given Conditional breeding status or denied approval based on those results (see page 2 for clarification).

Form current as of 2/2018. Fee changes may apply for applications after this date. All fees are subject to change without notice. All fees are non-refundable.

VI. HORSE IDENTIFICATION: Submit four photographs: front, both sides and rear view; all photos must be in color and clearly show any and all markings (including LP characteristics, brands and scars) on the head, body and all four legs.

Color & Marking Description: _____

GRAPHIC DESCRIPTION



CHECKLIST: Allow 4-6 weeks for processing.

- Form AG.1407 - Equine Testing with hair sample**(Pull 30-40 mane or tail hairs with roots attached. Place hairs into a plastic zip-lock bag)
- Four current color photographs (both sides of entire horse, front and rear view)**
- Close-up photos of characteristic of LP traits, scars, brands or other identifying marks, if applicable.**
- Fees (including membership fee, if needed)**
- RUSH FEE** - Seven (7) working days for conformation analysis (Member \$30; Non-Member \$50)
- I would like to be a member. I am enclosing an additional \$_____** (Also include the Membership Form – MA.1507)

Optional:

_____ Initial here if you would like to delay the genetic testing process until after conformation analysis results.

PAYMENT: Total Amount: \$_____

- Check Money Order Paypal Invoice Requested (\$5 service charge may apply)
- Pre-pay via Paypal (admin@SenderaDraft.com) Date Payment Sent: _____ Transaction#: _____

Approval Classifications:

- **Conditional** = Horse must have approval from the registrar before each breeding.
- **General** = Horse may breed to any registered Sendera Draft horse, so long as the resulting foal will have more than 50% draft ancestry.
- **Open** = Horse is allowed to bred to ANY registered Sendera Draft horse.

Genetic Diseases:

Group 1 - If your horse tests positive, it will **NOT** be granted approval, regardless of conformation.
 Group 2 - If your horse tests positive, it may be granted Conditional approval (see above).

Group 1

- **HYPP**
- **HERDA**
- **MH**

Group 2

- **GBED**
- **JEB**
- **PSSM1**