



# SDHR REGISTRATION APPLICATION

Please type or print neatly using blue or black ink

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

**PLEASE INITIAL BELOW - ONLY IF APPLICABLE:**

\_\_\_\_ This horse is **NOT** allowed breeding rights,  
 as breeder I am requesting **SHOWING ONLY** papers

## I. NAME SELECTIONS: (Maximum of 25 letters including spaces)

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

1st																											
2nd																											

- Horses must have a DNA (ISAG) profile on-file, please submit hair sample with application. (ISAG included with application fee)
  - All horses must have a 6 Panel Genetic Disorder test completed and on-file or submitted with application.
- IF both parents have been tested and are on file, only foals of positive horses will need to test to rule out individual disorders.

## II. HORSE INFORMATION:

**CITY / STATE / COUNTRY FOALED:** \_\_\_\_\_ **FOALING DATE:** \_\_\_\_\_  
**HORSE'S BARN NAME:** \_\_\_\_\_ **MICROCHIP#** \_\_\_\_\_  
**SEX:** \_\_\_ Mare \_\_\_ Stallion \_\_\_ Gelding **Date Spayed / Gelded:** \_\_\_\_\_

## 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:** \_\_\_\_\_

**OWNER NAME:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_  
**ADDRESS:** \_\_\_\_\_ **CITY:** \_\_\_\_\_ **STATE/PROVINCE:** \_\_\_\_\_  
**ZIP/POSTAL:** \_\_\_\_\_ **PHONE #:** \_\_\_\_\_ **SDHR MEMBERSHIP#:** \_\_\_\_\_

CHECK HERE IF THIS IS A NEW ADDRESS

As owner of this horse at time of registration, 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:** \_\_\_\_\_

The Certificate of Registration will be returned to the above address unless a transfer of ownership accompanies this application

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

- 1. Request for horse with two Sendera Draft Horse Registry parents (Member \$50; Non-Member \$65)
- 2. Request for horse with one SDHR parent & one Sendera Sporthorse or Approved Breeding Cross parent (Member \$60; Non-Member \$75)  
 \*\*(Option #1 and #2 -- 6 (six) Panel genetic testing and 50-100% Verified draft required.)
- 3. Request for horse with one SDHR parent & one Registered Clydesdale or Registered Shire (Member \$70; Non-Member \$85)
- 4. Request for horse with one SDHR parent & one Unapproved parent (Member \$80; Non-Member \$95)  
 \*\*\* (Option #3 and #4 -- Conformation evaluation, 6 (six) panel Genetic testing and 50-100% Verified draft required. Based on the conformational analysis and testing results, the horse may or may not be granted registration.)

**Optional** \_\_\_ Initial here if you would like to delay the genetic testing process until after conformation analysis results.

**Please refer to the current Rulebook for any additional requirements or contact the registry.**

**V. BREEDER'S CERTIFICATE: (ANY ALTERATIONS OR ERASURES MAY VOID THIS BREEDER'S CERTIFICATE)**

*THIS BREEDER'S CERTIFICATE MUST BE FULLY COMPLETED INCLUDING, REGISTRATION NAMES AND NUMBERS OF THE SIRE AND DAM, CORRECT BREEDING DATES AND BREEDING YEAR. INCOMPLETE INFORMATION MAY CAUSE A DELAY PROCESSING THIS APPLICATION.*

**BREEDING DATES:** \_\_\_\_\_ **BREEDING YEAR:** \_\_\_\_\_  
 \_\_\_ Artificial Insemination \_\_\_ Clone \_\_\_ Embryo Transfer \_\_\_ Frozen Semen \_\_\_ Hand Bred \_\_\_ Pasture bred \_\_\_ Transported Semen

This is to certify that the stallion \_\_\_\_\_ Registration #: \_\_\_\_\_  
 bred the mare \_\_\_\_\_ Registration #: \_\_\_\_\_

**•OWNER OF MARE AT TIME OF BREEDING: (Please print as it appears on the Mare's Certificate of Registration)**  
**NAME:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_  
**ADDRESS:** \_\_\_\_\_ **CITY:** \_\_\_\_\_ **STATE/PROVINCE:** \_\_\_\_\_  
**ZIP/POSTAL:** \_\_\_\_\_ **PHONE #:** \_\_\_\_\_ **SDHR MEMBERSHIP#:** \_\_\_\_\_

CHECK HERE IF THIS IS A NEW ADDRESS

**Signature X** \_\_\_\_\_ **Date:** \_\_\_\_\_

**•OWNER OF STALLION AT TIME OF BREEDING: (Please print as it appears on the Stallion's Certificate of Registration)**  
**NAME:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_  
**ADDRESS:** \_\_\_\_\_ **CITY:** \_\_\_\_\_ **STATE/PROVINCE:** \_\_\_\_\_  
**ZIP/POSTAL:** \_\_\_\_\_ **PHONE #:** \_\_\_\_\_ **SDHR MEMBERSHIP#:** \_\_\_\_\_

CHECK HERE IF THIS IS A NEW ADDRESS

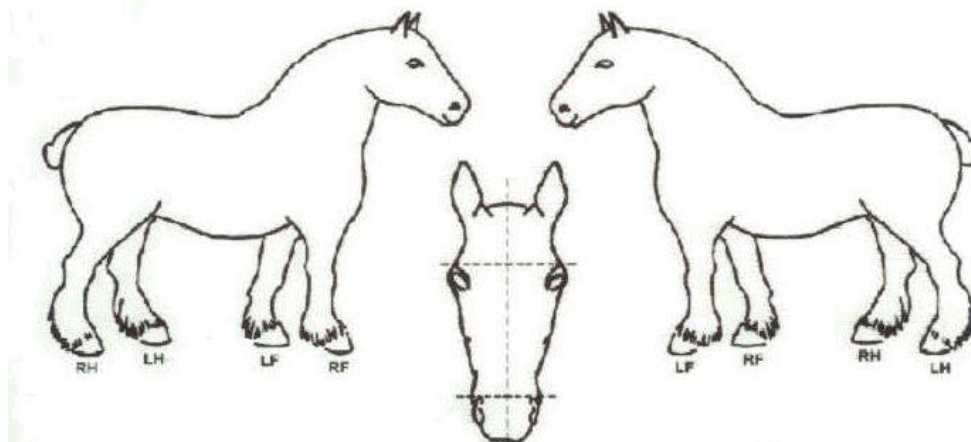
**Signature Required\*\* X** \_\_\_\_\_ **Date:** \_\_\_\_\_

\*\*Unless Stallion Report - **FORM SR.1302** has been previously turned in and signed off by stallion owner/agent.

**VI. IDENTIFICATION: Submit a minimum of 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 & Markings Description:** \_\_\_\_\_

**GRAPHIC DESCRIPTION**



**CHECKLIST: Allow 4-6 weeks for processing.**

- Form AG.1407 - Equine Testing with hair sample and payment** (Pull 30-40 mane or tail hairs with roots attached. Place hairs into a plastic bag.) \*\*Reminder - The ISAG profile is included with registration, the 6 (six) panel test is a separate cost
- Four current color photographs (both sides of entire horse, front and rear view)**
- Close-up photos of LP characteristic of solid horses, scars, brands or other identifying marks, if applicable**
- Fees (including membership fee, transfer fee, and/or genetic testing, if needed)**
- RUSH FEE** - Seven (7) working days for conformation analysis (Member \$30; Non-Member \$50)
- Form TF.1207 - Transfer of ownership** (if you are not the owner of the horse named for registration)
- I would like to be a member. I am enclosing an additional \$** \_\_\_\_\_ (Also include Membership Form MA.1507)

**PAYMENT: Total Amount: \$** \_\_\_\_\_

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

*Form current as of 1/2019. Fee changes may apply for applications after this date. All fees are subject to change without notice. All fees are non-refundable.*