

RAS PRE-REGISTRATION FORM - FIRST MEASURE EVER

OWNER TO COMPLETE THIS SECTION ONLY - Please print clearly

NOTE: DO NOT complete this form and take it straight to the Measuring Stand without sending it to RAS Head Office first and obtaining a Certificate. For a Change of Ownership, Replacement Certificate, Lease filed or Change of Classification please see - <https://www.ras.org.nz/equestrian/forms/>

HORSE / PONY (Show Name): Nick a Deez

If also registering with ESNZ ensure that they approve the name, before pre-registering with RAS

Colour: Grey **DOB-Month:** 11 **Year:** 2014 **Sex:** **S** (Stallion) **M** (Mare) **G** (Gelding)

Breed: Stockbred **Breed Reg. #** na.

Section Nominated **SP** Pony (P): Saddle Hunter Pony (SHP): Mini (M) Hack (HK): Saddle Hunter (SH): Riding Horse (RH): Cob (C)

CURRENT Owner's Name (18yrs and over): Janelle Coxall

Address (include RD#): Po Box 95 (17 Tui Street) P/Code 3912

Home Phone: (07) 81785532 **Mobile:** 02 11784915

Email: tony.jerelle@outlook.com My signature herewith confirms that I own the above Horse/Pony, and it has never had a previous Height Certificate under this name or any other name. I confirm I have searched the RAS database to confirm this - <https://www.ras.org.nz/equestrian/horse-search/>

Current Owner's Signature: [Signature] **Date:** 04/09/2020

PAYMENT - includes \$11 NZ Post Tracked Courier Bag (if applying for multiple Pre-Registration First Ever Measures, only one courier fee needs to be paid).

Direct Credit of \$42 made on 6/9/2020 and email form to enquiries@ras.org.nz
National Bank, A/c No.: 06 0501 0528903 00 - state Surname & horse's name as payment ref.

MEASURER TO COMPLETE BELOW and PART ON RIGHT

RULE: M9 a) Youngstock Measures issued to a pony or Miniature horse under the age of three years after August 1 will be valid until January 31st of the following year. **M9 b)** Measures issued or endorsed after January 1st will be valid until the end of the current Show season i.e. July 31st

First Measure Height	Date of Measure	Expiry Date	Stand #
<u>148-0</u> cm	<u>13/9/2020</u>	<u>13/1/2021</u>	<u>93</u>
Name of Measurer: <u>B & Gatten</u>		Signature: <u>[Signature]</u>	
Name of Witness: <u>C.M. Carter</u>		Signature: <u>[Signature]</u>	

Original form to be sent immediately after measure at stand to C/- 9 Matai Place, Oxford 7430, a copy is to be retained by the measuring stand.

RAS HEAD OFFICE USE ONLY:

RAS Certificate Number A

Form Received: ___ / ___ / 20 ___ **Paid \$42 on** ___ / ___ / 20 ___

Database: ___ / ___ / 20 ___ **Couriered on** ___ / ___ / 20 ___

NZ Post Bag - Track # _____

CR # _____

PAID IN FULL, NOTHING TO BE PAID AT MEASURING STAND

MEASURER - CONFIRM & NOTE MICROCHIP # (MN) OR IF NO MICROCHIP COMPLETE MARKINGS & BRANDS IF ANY

MN (or sticker) _____

Brands (if any) NS OS _____

