



American Shetland & Derivative
Association of New Zealand Inc



NOTICE OF DECEASED HORSE

NAME OF HORSE: _____

DATE OF DEATH: _____

REGISTRATION NUMBER: _____

OWNER: _____

ADDRESS: _____

PHONE _____ E MAIL _____

SIGNATURE: _____

(All to sign)

Date

NOTE: No Fees apply.

Return Form by mail to:

The Registrar
PO BOX 2146
Stortford Lodge
Hastings, 4153

Or Email Form to:

Alannah.horrocks@yahoo.co.nz