

Stallion Certificate Of Soundness

Entire form to be completed by a veterinarian.

Horse or Ponies Details:

Horse or Pony Name: _____

IMHR Registration: _____ Current Height: _____

Date of Birth: _____ Brands / Microchip: _____

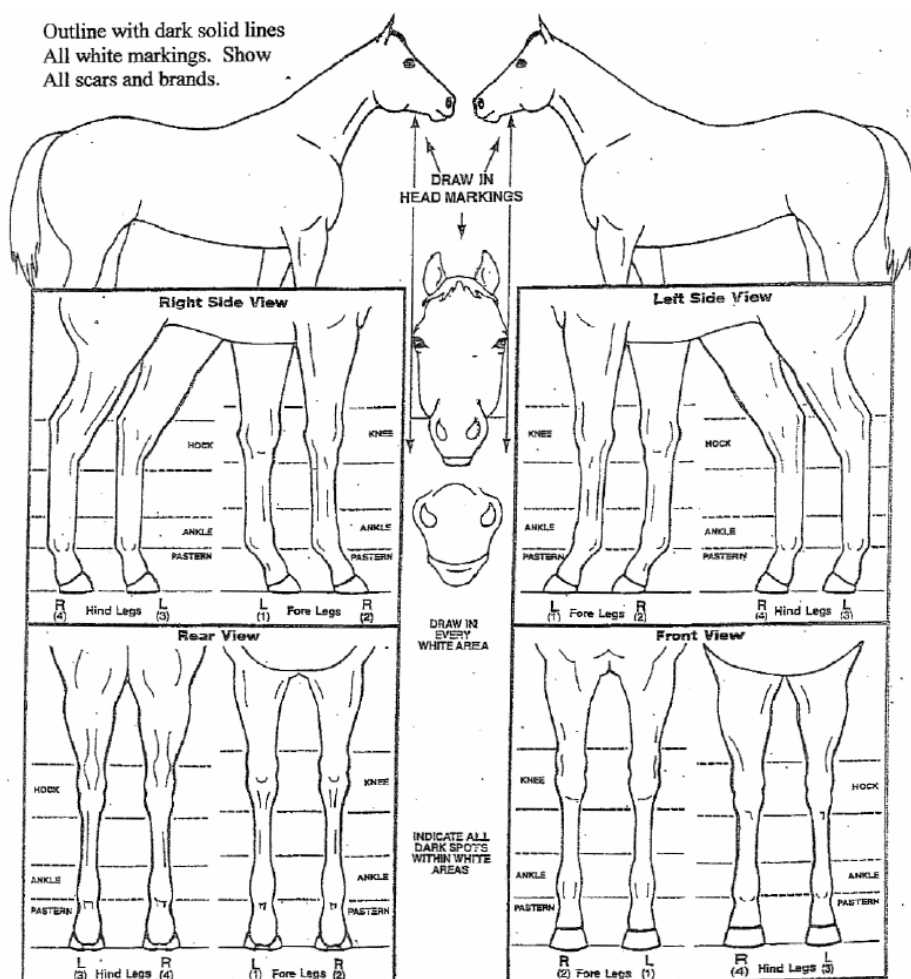
Owner(s):

Name: _____

Membership #: _____

Horse or Pony Markings and Identification:

Outline with dark solid lines
All white markings. Show
All scars and brands.



DRAW IN HEAD MARKINGS

Right Side View

Left Side View

Rear View

Front View

INDICATE ALL DARK SPOTS WITHIN WHITE AREAS

Tick box if sound
Strike out and comment if
unsound.

- | | |
|--------------------------|-----------------------------|
| <input type="checkbox"/> | Congenital Cataract |
| <input type="checkbox"/> | Overshot Jaw |
| <input type="checkbox"/> | Parrot Mouth |
| <input type="checkbox"/> | Dwarfism |
| <input type="checkbox"/> | Malformation of Genitals |
| <input type="checkbox"/> | Locked Stifle |
| <input type="checkbox"/> | Other Congenital Leg Faults |
| <input type="checkbox"/> | Other Genetic Faults |

I certify that on this particular day,
this horse shows no visible signs of
defects at the time of examination.

Name: _____

Signed: _____

Dated: _____

Send completed form with IMHR Work Order.

A duplicate certificate fee is payable if an updated copy of registration certificate required. There is no additional fee if this document is included with original registration or upgrade application.

Fees and postal address details are available on IMHR Work Order.