



# BRITISH MORGAN HORSE SOCIETY

REGISTRAR - John Daniels

Churchtown Morgans  
The Old Vicarage  
Churchtown St Hilary, Penzance,  
Cornwall. TR20 9DQ

Tel: 01736 711508  
e-mail registry@morganhorse.org.uk

## CLARIFICATION APPLICATION

Instructions:

1. Print in ink or type only
2. Read and follow the Change of Colour or Markings Rule below.
3. The reverse of this form should be completed by a qualified Veterinary Surgeon.

Registered Name: \_\_\_\_\_ Registered No \_\_\_\_\_

Sex: Mare  Stallion  Gelding  Date Gelded \_\_\_\_\_

### SECTION 5: CHANGE IN COLOR OR MARKINGS

A. The recorded owner may request a change of coat color, true white markings, or the addition of other identifying markings as recorded on the Registration Certificate, providing the following are submitted:

1. The official Registration Certificate.
2. A correctly completed application form provided by the Register.
3. Clear, discernible photographs of the horse, as described in Rule 8, Section B, Paragraph 2. (see below)
4. Additional information, such as bloodtyping, documentation, etc. deemed appropriate by the Register.

B. Upon approval by the Register, an amended Registration Certificate shall be issued to the recorded owner.

Rule 8 Section B Paragraph 2. Clear, discernible color photographs of the horse individually labeled with the name, registration number, date of birth, coat color, sex, markings, and date the photograph was taken. Photographs must show full views of the left, right, front, and rear of the horse. In order to show all markings, photographs must include all four legs, left and right side views of the body, front view of the head, and rear view of the hindquarters.

**I (we) hereby certify the identity of the Morgan Horse described overleaf as being the same horse registered and recorded in the British Morgan Horse Society Register or pending entry in that book.**

Signed: \_\_\_\_\_

Recorded Owner(s) or Lessee(s)

Print Name: \_\_\_\_\_

Address: \_\_\_\_\_

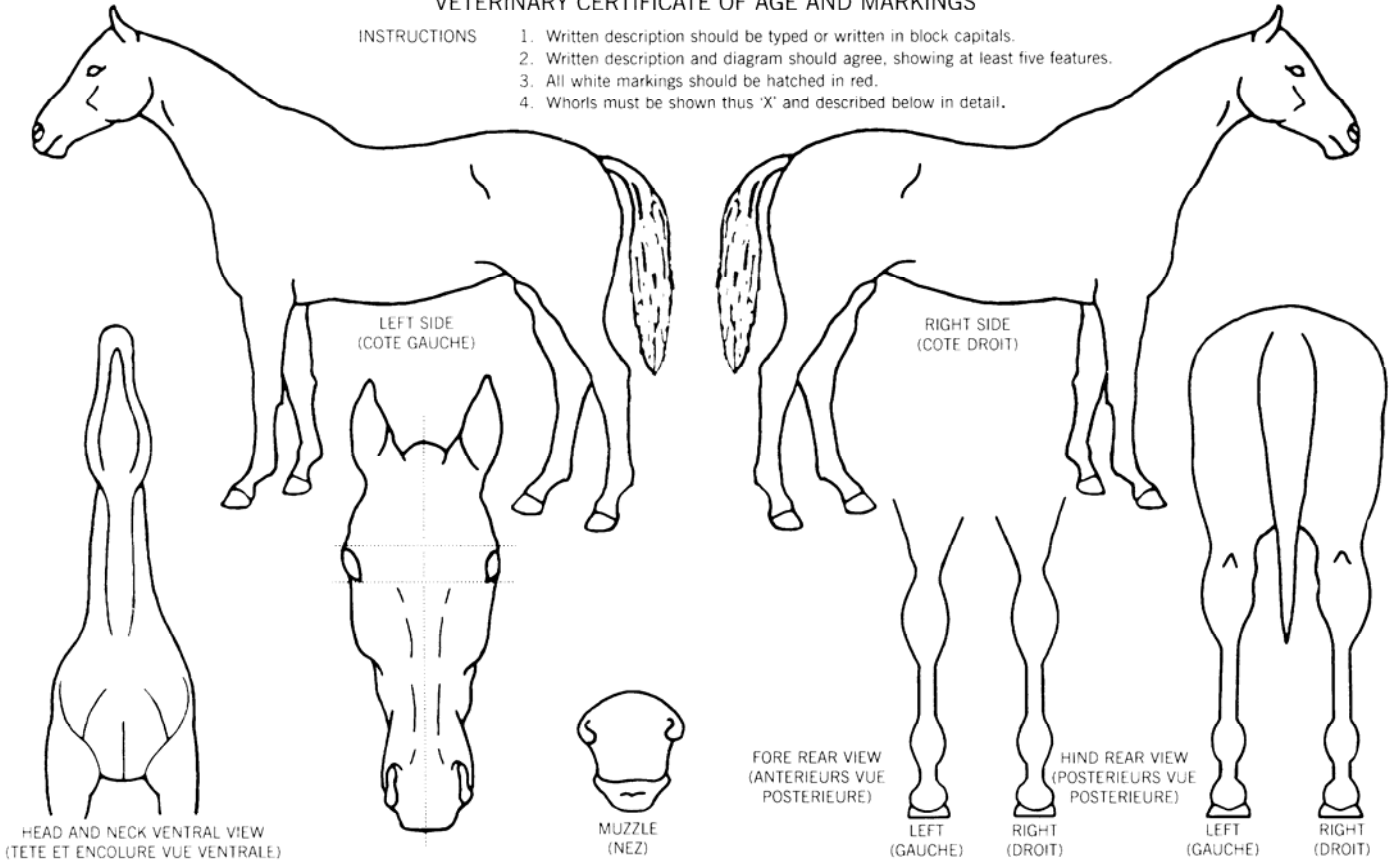
Postcode: \_\_\_\_\_

**Please return this form with photographs to the Registrar at the above address.**

**FOR IDENTIFICATION PURPOSES  
VETERINARY CERTIFICATE OF AGE AND MARKINGS**

**INSTRUCTIONS**

1. Written description should be typed or written in block capitals.
2. Written description and diagram should agree, showing at least five features.
3. All white markings should be hatched in red.
4. Whorls must be shown thus 'X' and described below in detail.



**\*THESE ITEMS ARE BASED ON INFORMATION SUPPLIED BY THE OWNER OR HIS/HER AGENT**

COLOUR	*DATE OF BIRTH / /	*SIRE	*DAM	
SEX	*DATE OF IMPORTATION / /	*BMHS/AMHA Reg No	*BMHS/AMHA Reg No	
HEAD				
NECK				
L.F.			L.F. Chestnut	R.F. Chestnut
R.F.				
L.H.			L.H. Chestnut	R.H. Chestnut
R.H.				
BODY				
ACQUIRED				
DATE OF EXAMINATION ____/____/____		SIGNATURE OF VETERINARY SURGEON §		NAME & ADDRESS OF VETERINARY SURGEON
To be completed in accordance with the F.E.I. rules on horse identification, by a veterinary surgeon.		§ Not to be the breeder, owner or Trainer of the horse for which the certificate is issued.		