



Friesian Blood Horse Registry

PO Box 134
Garrison MN 56450-0134

218.678.2477 phone

218.678.2057 fax

fbh@mlecmn.net

REGISTRATION / MEMBERSHIP FORM

Date _____

Owner Name(s) as they should appear on the owners certificate

Farm name _____

website _____

Address _____

Phone _____ Street _____ City _____ State _____ Zip _____
Fax _____ email _____

Register my horse as _____ 2nd choice _____
Name requested

Foaling date _____ Sex: stallion _____ mare _____ gelding _____
Please mark one _____/_____/_____
date gelded

Color _____ marking(s) _____

Microchip number _____ Tattoo _____ and/or Brand _____
number number description

Please send a photo via email or include one with this form

Sire - _____

Registry - _____

Registration # _____

Breed of stallion - _____

Stallion owner _____

Dates of breeding _____

Signature of stallion owner _____

Address _____

Phone _____ email _____

Please send a copy of both the dam and sires papers

Dam - _____

Registry - _____

Registration # _____

Breed of mare - _____

Mare owner - _____

Address - _____

Owner signature _____

Phone _____ email _____

Please send a copy of both the dam and sires papers

[please see back](#)

Fee schedule: Please check off all that apply.

_____ Membership \$40.00

_____ Registration \$45.00 **Required**

_____ DNA test kit \$50.00

_____ Ownership transfer (**member**) \$25.00

_____ Ownership transfer (**non-member**) \$35.00

_____ Duplicate papers \$20.00

_____ Microchip \$30.00

Total enclosed \$ _____

Card Number _____
Expiration date of card _____

_____ Card holder's name (print) _____ Card holder's signature
(required)

cvc2 code (three digit # from back of card) _____

Zip code of card holder _____



For Office Use Only

Approval code _____

Approval date _____

Approval amount _____



Make PayPal payments to
friesianbloodhorse@yahoo.com