

(Please print or type)

Indicate which breed (mark square with an X)

TB

QH

NMHBA Registration Number

For Office Use Only

Name of Foal

If unnamed - so state

Color

Male

Female

Sex

Month Born

Day Born

Year Born

Sire

Dam

Mare's last breeding date for this foal

**DESCRIBE** ranch or farm location where foal was born:

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City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

LIST all locations where mare was kept during her pregnancy.

(DESCRIBE EACH LOCATION IN DETAIL)

The information requested below is to be provided in as much detail as possible. The Association reserves the right to require that additional information be provided prior to final processing of this application. The Association also reserves the right, at any time, to require that additional information be provided to verify the accuracy of your representations.

\_\_\_\_\_ to \_\_\_\_\_

Month/Year

Month/Year

\_\_\_\_\_ to \_\_\_\_\_

Month/Year

Month/Year

**If space provided is insufficient for a complete description, please attach additional pages.**

**MUST BE COMPLETED AND SIGNED ON REVERSE SIDE**

Owner of Sire \_\_\_\_\_

If this was by Transported Semen, to whom & where was the semen shipped? \_\_\_\_\_

\_\_\_\_\_

Location where breeding took place \_\_\_\_\_

\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name of **OWNER**  
(Applicant) \_\_\_\_\_

Please print or type

**OWNER'S** signature \_\_\_\_\_

Owner's address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

- Quarter Horse Breeder of record is the owner of dam at time of conception.
- Thoroughbred Breeder of record is the owner of dam at time of foaling.  
(The breeder for all foals prior to 2019 is the owner of dam at time of foaling.)

**NMHBA goes by breeder listed on horse's registration certificate.**

Name of **BREEDER** \_\_\_\_\_

Please print or type

**BREEDER'S** signature \_\_\_\_\_

**Business/Syndicate/Farm require manager's signature**

Breeder's address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**MAIL TO: NEW MEXICO HORSE BREEDERS' ASSOCIATION  
4836 HARDWARE DR. NE, SUITE B, ALBUQUERQUE, NM 87109  
PHONE (505) 262-0224**

Registration as a New Mexico Bred **IS NOT COMPLETE UNTIL WE HAVE RECEIVED FROM YOU THE ORIGINAL FOAL CERTIFICATE PAPERS FOR FINAL APPROVAL AND STAMPING.**

NOTE: This application must be signed by the **OWNER** and **BREEDER** (or their authorized representative) attesting to the accuracy of the above.

**Registration fees currently in effect:**

Weanlings..... \$60  
 Yearlings..... \$150  
 2 year-olds..... \$1,000  
 Older..... \$2,000  
 Out of State Foaling Fee..... additional \$500

**If your membership fees are not paid-up, please enclose annual dues. (Use Form #400)**

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\_\_\_\_\_ Date Received \_\_\_\_\_ Date Approved and Seal affixed \_\_\_\_\_ NM Bred # \_\_\_\_\_