



**FOALING NOTIFICATION** **ANNEX B TO PART 3**

|                                      |  |  |
|--------------------------------------|--|--|
| Type                                 | Pure Bred <input type="checkbox"/> Appendix <input type="checkbox"/><br>Dual Appendix/Performance <input type="checkbox"/><br>Dual Appendix/Warmblood <input type="checkbox"/> |  |
| Foal Name<br>(including stud prefix) |  |  |
| Foaling Date                         |  |  |
| Sex                                  |  |  |
| Colour                               |  |  |
| Full Markings                        |  |  |
| Sire & Registration Number           |  |  |
| Dam & Registration Number            |  |  |
| Owners Name                          |  |  |
| Address                              |  |  |
| Email                                |  |  |
| Phone                                | Landline<br>Mobile   |  |
| Breeders Name                        |  |  |
| Breeders Address                     |  |  |
| Breeders Contact Details             | Phone<br>Email   |  |
| Return completed form to             | registrar@percheron.com.au<br>The Registrar<br>PHBAA<br>Kirsty McKenna<br>Outlook Stables<br>146 Brookland Rd<br>Allenvue Qld 4285   |  |
| Enquires                             | 0411593211   |  |