



International Pattern Sport Horse Registry

17260 Ingersoll Ave No / Hugo, MN / 55038

www.ipshr.com

651-653-1341 or Toll Free 1-877-653-1341

PINTO REGISTRATION FORM

Instructions: Please complete all pages clearly and legibly. Please provide at least two name options. Limit the use of punctuation marks or numbers in the name choices. Names should not exceed 30 characters (spaces included). Submit 3 clear, close photographs of the horse/s. Photographs should include the left and right side of the whole horse (including the feet and ears) and one close-up photograph of the horses face. All photos must be in color and clearly show any and all markings. Photos can be emailed with one horse per email. Please write the name of the horse on the back of the photos or in the subject line of the email. If available, include one profile photo of the Sire and Dam of the horse being registered. If the sire and dam are on file with IPSHR no photos are needed. One registration form is required per horse. Send completed application to the address above.

Please remember to include your check for \$28.00 per horse.

If you are not a member be sure to include your one time \$20.00 membership fee.

A NAME SELECTIONS You may use a farm name like Peter Pan of Neverland Ranch. Please do not use one word names.

1) _____

2) _____

Is this horse registered with another registry? Yes No

If yes, name of other primary registry _____
(Please do not abbreviate)

Registration # _____

B FOALING INFORMATION I don't know any of the foaling information Date of birth is approximate

Date of Birth (MM/DD/YY) _____ State / Province Foaled in _____

City foaled in _____ Country foaled in _____

I am registering a filly (under 3 years) mare colt (under 3 years) gelding stallion

C PEDIGREE INFORMATION

Is the sire registered? Yes No I have enclosed a copy of the sire's registration papers or pedigree

Registry Name _____ Registration # _____

Sires registered name _____ Breed _____

Base Color _____ Color Modifiers _____ Pattern _____

Is the dam registered? Yes No I have enclosed a copy of the dam's registration papers or pedigree

Registry Name _____ Registration # _____

Dams registered name _____ Breed _____

Base Color _____ Color Modifiers _____ Pattern _____

D COLOR AND MARKING IDENTIFICATION

BASE COLOR

- Black
- Bay
- Chestnut / Sorrel
- Brown
- Seal Brown
- Other _____

COLOR MODIFIERS

- Champagne
- Cream
- Dun (primitive marks)
- True Roan
- Silver Dapple
- Grey (Also check a base color)
- None
- Other _____

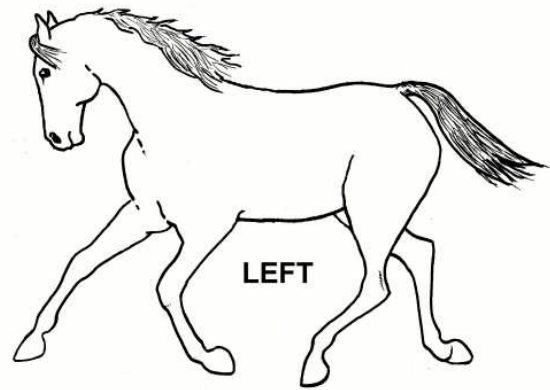
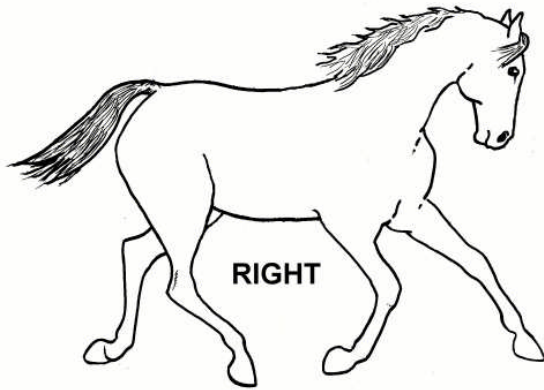
PATTERNS

- Overo
- Tobiano
- Sabino
- Maximum Sabino
- Splash
- Solid
- Other _____

I have DNA Color tested this horse and I am submitting a copy of those results YES NO

* Submitted results will be marked on the registration document

Please draw markings on the pictures



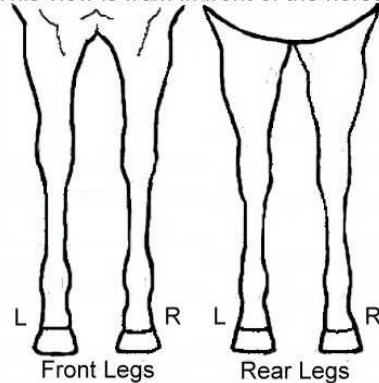
Please draw white face markings and leg markings

Does this horse have blue eyes? YES NO

Left Eye Right Eye

Please check the box next to the horses nose if white marks are present on the horses lower lip.

This view is from in front of the horse



E TATTOOS, BRANDS AND MICROCHIPPING

My horse has the following:

- Tattoo Number _____
- Freeze Brand Description _____
- MircoChip Brand of chip _____ Number _____
- Scars or Other (Explain) _____

F DECLARATION OF BREED:

In this declaration, we are hopeful to satisfy the passions of the owners/breeders of all Pinto horses to have equal representation in the disciplines of the Sport Horse. Please declare your horse in one of the following descriptions:

- Pinto Pony
- Pinto Draft Horses (Spotted Draft)
- Other Pinto Breeds _____
- Pinto Color Horse
- Solid (coming from Pinto parents)

Horse must be a Pinto breed with a four generation pedigree, no out crossing, closed book breedings, or an approval process.

* Please note that Declaration Categories may be added or eliminated, at an annual review, as deemed necessary by the council members of the IPSHR

G DNA PARENT VERIFICATION REQUIREMENT

DNA is not required by IPSHR at this point in time. It is quite possible in the near future that it will become a registration requirement. If your horse is already DNAed with another registry, please supply a copy of the DNA report.

- I am supplying IPSHR with a copy of Parent Verification DNA test
- I have no DNA test to submit

H HYPP REQUIREMENTS & GENETIC DEFECTS

HYPP testing is suggested for all grade horses. HYPP testing is required for horses that are linked by pedigree to the American Quarter Horse, Impressive. These horses must be double negative, or have proof of a negative horse in the pedigree following Impressive. These horses must be "double negative" (HYPP N/N) in order to be registered as negative. Please supply IPSHR with a copy of the HYPP test results showing N/N status. It is the goal of the IPSHR to eliminate genetic defects whenever possible. Other genetic defect declarations may be required if they are suspected. If the horse being registered is not HYPP tested it is noted on the registration papers.

I hereby claim that the horse being registered on this form is to the best of my knowledge free from genetic defects. I understand that the horse may be removed from the registry if genetic defects are not disclosed.

Signature: _____ Date _____

I am disclosing that this horse has or may have the genetic defect listed:

Defect: _____

IN THE SECTIONS BELOW PLEASE PRINT CLEARLY

I RECORD BREEDER Please record the breeder of this horse as:

Name _____ Phone # _____
 Address _____ Email _____
 City _____
 State/Province _____ Zip Code _____

- I do not know the breeder of this horse

J RECORD OWNER Same as above YES NO

Name _____ Phone # _____
 Address _____ Email _____
 City _____
 State/Province _____ Zip Code _____

This section is not for spouses or children, but for a non relative that may co-own the horse. Remember with a Co-owner both must sign documents. For relatives use and/or in the name line. Example: John & Jane Smith (both sign), OR John or Jane Smith (either can sign)

This horse is co-owned YES NO If yes, list information below:

Name _____ Phone # _____
 Address _____ Email _____
 City _____
 State/Province _____ Zip Code _____



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BREEDERS CERTIFICATE FOR IPSHR

This certificate is for a horse being registered as _____ with the IPSHR.

This portion is to be filled out by Stallion owner at time of breeding ↓ Or other proof of ownership must be submitted.

Name of Stallion _____	Breed of Stallion _____
Stallion is registered with _____	Registration # _____
Stallion is co-owned YES <input type="checkbox"/> NO <input type="checkbox"/> Name of owner(s) at the time of breeding: _____	
I hereby certify that I/we was/were the recorded owner(s) of the stallion listed above at the time of breeding the mare listed below.	
Owner of Stallion	Co-Owner of Stallion None <input type="checkbox"/>
Name _____	Name _____
Address _____	Address _____
City _____	City _____
State/Province _____	State/Province _____
Country _____	Country _____
Phone _____ Cell _____	Phone _____ Cell _____
Email _____	Email _____
Services provided from _____ to _____	
<input type="checkbox"/> Pasture bred <input type="checkbox"/> Handled/live <input type="checkbox"/> Artificial Insemination on Site <input type="checkbox"/> Transported Semen <input type="checkbox"/> Frozen Semen <input type="checkbox"/> Embryo Transfer	

Mare owner at time of breeding (below ↓) Same as stallion owner above YES NO

Name of Mare _____	Breed of Mare _____
Mare is registered with _____	Registration # _____
Mare is co-owned YES <input type="checkbox"/> NO <input type="checkbox"/> Name of owner(s) at the time of breeding: _____	
I hereby certify that I/we was/were the recorded owner(s) of the mare at the time of breeding.	
Owner of Mare	Co-Owner of Mare None <input type="checkbox"/>
Name _____	Name _____
Address _____	Address _____
City _____	City _____
State/Province _____	State/Province _____
Country _____	Country _____
Phone _____ Cell _____	Phone _____ Cell _____
Email _____	Email _____

Mare owner at time of foaling (below ↓) Same as above YES NO

Name of Mare _____	Breed of Mare _____
Mare is registered with _____	Registration # _____
Mare is co-owned YES <input type="checkbox"/> NO <input type="checkbox"/> Name of owner's at the time of breeding: _____	
I hereby certify that I/we was/were the recorded owner(s) of the mare at the time of foaling.	
Owner of Mare	Co-Owner of Mare None <input type="checkbox"/>
Name _____	Name _____
Address _____	Address _____
City _____	City _____
State/Province _____	State/Province _____
Country _____	Country _____
Phone _____ Cell _____	Phone _____ Cell _____
Email _____	Email _____