



# QPAA

## Notice of Gelding

### This Is To Certify That:

Name of pony: \_\_\_\_\_ Registration #: \_\_\_\_\_

Height: \_\_\_\_ . \_\_\_\_ hh      Age: \_\_ / \_\_ / \_\_\_\_      was Gelded on \_\_ / \_\_ / \_\_\_\_

### Owner Details

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

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

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Post Code: \_\_\_\_\_

Phone: (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_ / \_\_ / \_\_\_\_

### Veterinarian Details

Name: \_\_\_\_\_ Clinic: \_\_\_\_\_

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

Suburb: \_\_\_\_\_ State: \_\_\_\_\_ Post Code: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_ / \_\_ / \_\_\_\_

### Current Registrations

Please return this form to the office with the original copy of the registration papers and two current photos for the new registration certificate. The photos must be clear side shots (one of either side). **Fee: \$10.00**

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#### Fee

Gelding Notice **\$10.00**

#### Bank Details

**Bank Transfer**

**PayPal** not available

**Cheque**

**Cash**

#### Post To

QPAA Inc.

PO Box 457

Beaudesert Q 4285

quarterponyassn@gmail.com

#### OFFICE USE ONLY

Processed By: \_\_\_\_\_

Processed Date: \_\_\_\_\_

Receipt #: \_\_\_\_\_