

ABHAID

Horse Name

Breed Registry Number

Sex

Colour

Foaled

Current Age

Owner

Breeder

AS OF Friday, 1 August 2025

HORSE IS ELIGIBLE TO COMPETE IN

- 4yr Old Futurity
- 5yr Old Futurity
- 6yr Old Futurity**
- 7yr Old Maturity
- 8yr Old Maturity
- 9yr Old Maturity

Marking



ABHA Age Inspection Form

Required if original registration certificate is not available or needs to be re-registered.
If registered Equine Practitioner must complete the markings and description.
Incomplete forms or forms not filed with an Equine Practitioner may be rejected.
*Required field

Horse Name*

Owners Name*

Owners Address*

Owners Mobile Phone*

Owners Phone No:

Breed*

Page No:


Age or DOB*

Colour*

Sex*

Sex*

Dem*



Owner's Declaration

I declare that the information provided on this form is true and correct.

Signature: *Veronica Luxford* Date: 01/08/2025

Registered Equine Animal Veterinarian

I declare that I am a registered Equine Animal Veterinarian and have inspected and marked this horse. I will mark in markings and which, and in the knowledge the information marked on this form is true and correct.

Name: *Dr. Anula Elvel*

Practitioner Name: *Kelly Veterinary Services*

Address: *630 Wray Wella Road*

Shortland SA 5279

Phone No: *0800998278*

Signature: *Anula Elvel* Date: *1/8/25*

Qualification: *BVetSc/BVetSc (Hons)*

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PLEASE REMEMBER TO BRING ORIGINAL BREED CERTIFICATE TO EACH EVENT FOR AGE CHECKS