

ABHAID

Horse Name

Breed Registry Number

Sex

Colour

Foaled

CurrentAge

Owner

Breeder

AS OF Wednesday, 15 April 2026

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 horse is unregistered.
 Registered Equine Practitioner must complete the markings and describe.
 Markings on horses not listed by an Equine Practitioner may be ignored.
 *Required field

Horse Name:

Owner's Name: (Adult Minor)

Owner's Address:

Owner Mobile Phone: Breeder Name/Practitioner Name:

Inspection Photo No:

Breed:

Rego No:

Age on DOB:

Colour:

Sex:

Sex:

Sex:

Owner's Declaration
 I declare that the information provided on this form is true and correct.
 Signature: *[Signature]* Date: 25/04/26

Registered Equine Practitioner Declaration
 I declare that I am a registered Equine Dental Practitioner and have inspected and marked this horse. Mark in markings and describe, adding my knowledge the information obtained on this form is true and correct.
 Name:
 Practice Name:
 Address:

 Phone No:
 Signature: *[Signature]* Date: 27/04/26
 Qualifications:

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