



Change of Ownership Form

Return form to:
AIMHCNZ Registrar: Linda Jackson
93 Manutahi RD, RD 2, New Plymouth 4372
Or email
aimhcnz.registrar1@gmail.com

- **This form is to be completed by the horse owner/s selling the horse.**
- **Complete a SEPARATE form for EACH horse.**
- **Form to be returned to the registrar asap after sale of the horse.**

Registered name of horse:

AIMHCNZ Reg #: _____ D.O.B: _____ Height: _____

Mare/Stallion/Gelding: (please circle) Date of Sale: _____

Owner/s Name: _____

Address: _____

Phone: _____

Email: _____

New owner/s Name: _____

Address: _____

Phone: _____

Email: _____

Declaration:

I/We hereby certify that all information supplied in relation to this return is true and correct to the best of my/our knowledge.

Signature(s) of owner/s: _____

_____ (all to sign) Date: _____

Note: Signature of parent or guardian if applicant aged under the age of 18yrs.