



Leisure Horse Ireland

Furbo Hill, Spiddal, Co. Galway, H91 VH04, Ireland.
Tel. +353 (0) 91 577 577 Fax. +353 (0) 91 670 111 Email: info@lhi.ie
www.LHI.ie



APPLICATION FORM

The Irish Donkey Studbook - Pedigree Recorded (Yearling & Older) Registration / Passport Overstamp
(all sections must be completed in BLOCK CAPITALS and declaration signed and dated by the applicant)

PRESENTER / KEEPER DETAILS: <i>(details will appear in the passport)</i>		OWNER DETAILS (if different): <i>(details will appear in the passport)</i>		
Name:		<input type="checkbox"/> <input checked="" type="checkbox"/> <i>(Same as Presenter / Keeper Opposite)</i> Name:		
Address:		Address:		
Post Code:		Post Code:		
Tel. No.:		Tel. No.:		
Email:		Email:		
EQUINE PREMISES NUMBER: <i>(detail the DAFM number where the animal is kept, as of Jan 2016 a registration cannot proceed without this number)</i>				
ANIMAL NAME: <i>(all animals must be named on registration, if no name is chosen LHI will pick a random name, if a chosen name is not available, a variation of a chosen name will be used)</i>		ANIMAL DETAILS:		
		COLOUR:		
1st Choice:		<input type="checkbox"/> <input checked="" type="checkbox"/> MALE <input checked="" type="checkbox"/> COLT <input checked="" type="checkbox"/> GELDING <input checked="" type="checkbox"/> STALLION	SEX 	
2nd Choice:				<input type="checkbox"/> <input checked="" type="checkbox"/> FEMALE <input checked="" type="checkbox"/> FILLY <input checked="" type="checkbox"/> MARE
3rd Choice:				HEIGHT: _____ <small>CMS</small>
		COUNTRY OF ORIGIN: <input checked="" type="checkbox"/> IRELAND OTHER: _____		
COVERING CERTIFICATE NUMBER: <i>(if available)</i>				
IS THE ANIMAL REGISTERED WITH ANY OTHER ISSUING AUTHORITY? <i>*(if it transpires that the animal is registered with another PIO in Ireland, fees will not be refunded)</i>		<input type="checkbox"/> <input checked="" type="checkbox"/> NO* <input type="checkbox"/> <input checked="" type="checkbox"/> YES		

Note Regarding Stallions: *(All stallions 3 years old and over must be registered & licensed as such with The Irish Piebald & Skewbald Studbook. An annual licensing fee will apply thereafter. Please contact LHI for full details.)*

BREEDER DETAILS: <i>(details will appear in the passport)</i>	<input type="checkbox"/> <input checked="" type="checkbox"/> <i>(Same as Presenter / Keeper above)</i>	<input type="checkbox"/> <input checked="" type="checkbox"/> <i>(Same as Owner above)</i>
Name:		
Address:		
Post Code:		
Tel. No.:		
Email:		

KNOWN PEDIGREE: (If breeding is known further back than Grand Sire please list on separate piece of paper)

Sire:	Breed Society	Registration Number
Gr. Sire	Breed Society	Registration Number
Gr. Dam	Breed Society	Registration Number
Dam:	Breed Society	Registration Number
Gr. Sire	Breed Society	Registration Number
Gr. Dam	Breed Society	Registration Number

APPLICATION CHECKLIST:

- ✓ Markings completed by identifying Vet as per FEI guidelines &
 ✓ Compliant transponder implanted where none pre-existed.
 ✓ This application form completed in full & signed by applicant.
 ✓ For verified parentage you must enclose with this application:
Dna SAMPLE *and* Mares Passport Details.
 ✓ If passport overstamp only, also send the original passport.

Return Delivery:

Cost of standard postage is included in registration fees, however risk of loss is entirely borne by the applicant unless recorded return delivery is requested by and paid for by the applicant.

Note:

Handwritten Microchip numbers may delay processing times so as to allow checking with other Passport Issuing Authorities.

Incomplete or Incorrect applications requiring referral or return may incur additional administration fees.

An equines Identification Document must be applied for within 6 months of birth, equines who have not had their Identification Document issued within 12 months of birth will not be suitable for slaughter for human consumption and will be classified accordingly in Section II Part II of the Identification Document.

For verified parentage applications, delays can ensue awaiting results back from the DNA lab.

PAYMENT:

Refer to our website www.LHI.ie for current registration fees. At time of printing, including vat , fees are:

IDS Pedigree Yearling Registration € 80.00
(Includes DNA Typing Costs)

(If Applicable)

Mare DNA Typing also € 50.00

Passport Overstamp € 30.00

Stallion Registration € Contact LHI

Return Recorded Delivery by Courier ✓

IRL € 10 UK € 16

(This is a single payment for one or more passports)

Cheques & postal orders etc should be made payable to **LHI**.

We also accept payment by VISA or MASTERCARD and you may telephone in advance of sending in an application:

Prepaid by card ref no.: _____

Or Total Enclosed: € _____

DECLARATION: (BY SUBMITTING THIS APPLICATION I AM DECLARING THAT TO THE BEST OF MY KNOWLEDGE THE PARTICULARS ON THIS FORM AND ASSOCIATED MARKING CHART ARE CORRECT AND I AGREE TO ABIDE BY THE RULES OF LEISURE HORSE IRELAND. IT IS FURTHER UNDERSTOOD THAT KEEPER / OWNER & ANIMAL DETAILS WILL ALSO BE SUBMITTED TO THE NATIONAL EQUINE DATABASE)

Signed: _____

Date: _____



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VETERINARY EXAMINATION

The Irish Donkey Studbook - Stallion Examination Report

(all sections must be completed in BLOCK CAPITALS and declaration signed, stamped and dated by the qualified Vet)

VETERINARY SURGEON DECLARATION		STALLION NAME:	
NAME: <i>(Block Capitals)</i>		TRANSPONDER NO.(S) FOUND: <i>(15 digits)</i>	
PRACTICE: <i>(Block Capitals)</i>			
OFFICIAL VET STAMP, SIGNATURE & DATE:		APPROX AGE:	
VCI Vet Reference Number: / <i>(applies to Ireland only)</i>		HEIGHT:	
Signed, _____ Date: ____/____/____		HEART:	<input type="checkbox"/> <input checked="" type="checkbox"/> Normal <input type="checkbox"/> <input checked="" type="checkbox"/> Abnormal <i>Remarks:</i>
		EYES	<input type="checkbox"/> <input checked="" type="checkbox"/> Normal <input type="checkbox"/> <input checked="" type="checkbox"/> Abnormal <i>Remarks:</i>
		MOUTH:	<input type="checkbox"/> <input checked="" type="checkbox"/> Normal <input type="checkbox"/> <input checked="" type="checkbox"/> Abnormal <i>Remarks:</i>
		GENITALIA:	<input type="checkbox"/> <input checked="" type="checkbox"/> Normal <input type="checkbox"/> <input checked="" type="checkbox"/> Abnormal <i>Remarks:</i>

LIMBS INCLUDING FEET: *(Examination for ringbone, sidebone, bone spavin, curbs, etc. Allowance should be made for obvious injury)*

LEFT FORE:	
RIGHT FORE:	
LEFT HIND:	
RIGHT HIND:	

MOVEMENT: <i>Evidence of Lameness (Give Reason)</i>	
EVIDENCE OF SHIVERING, STRINGHALT, OR WOBBLER SYNDROME: <i>(Remarks)</i>	
LUNGING (WIND):	<input type="checkbox"/> <input checked="" type="checkbox"/> Normal <input type="checkbox"/> <input checked="" type="checkbox"/> Abnormal <i>Remarks:</i>
ENDOSCOPIC EXAMINATION:	<input type="checkbox"/> <input checked="" type="checkbox"/> Normal <input type="checkbox"/> <input checked="" type="checkbox"/> Abnormal <i>Remarks:</i>