



**KWPN-NA
BREED PASSPORT APPLICATION**



HORSE DISCIPLINE _____		
USEF HORSE RECORDING NUMBER (MANDATORY) _____		
FULL HORSE NAME _____		(exactly as recorded with USEF)
PREVIOUS HORSE NAME _____		
SEX (check one) <input type="checkbox"/> MARE <input type="checkbox"/> GELDING <input type="checkbox"/> STALLION	FOAL DATE _____	COLOR OF HORSE _____
BREED _____	COUNTRY OF BIRTH _____	BREEDER _____
BREED REGISTERED NAME _____	BREED REGISTRATION NUMBER _____	
SIRE _____	DAM _____	
SIRE OF DAM _____	MICROCHIP NUMBER _____	

OWNER INFORMATION	OWNER USEF MEMBERSHIP NUMBER (MANDATORY) _____
OWNER NAME _____	OWNER NATIONALITY _____
ADDRESS _____	
CITY _____	STATE _____ ZIP _____
E-MAIL _____	
OWNER'S SIGNATURE: (AGENT SIGNATURES ARE NOT ACCEPTED) _____	
By submitting this application, I agree to abide by all USEF / FEI rules and verify that all information is correct or I may be subject to sanctions.	

IMPORTANT	CONTACT INFORMATION AND SHIPPING ADDRESS FOR PASSPORT (If different from above)
NAME _____	E-MAIL ADDRESS _____
PHYSICAL ADDRESS _____	
CITY _____	STATE _____ ZIP _____
PHONE NUMBER _____	CELL PHONE _____

PAYMENT INFORMATION - \$35.00

Credit Card payment (or check may be sent). We accept Visa, Mastercard, Discover and Amex

Please send an online invoice through QuickBooks Online

Card Number _____ Exp _____ CCV: _____

Mail this form to:

KWPN-NA, 4037 Iron Works Pkwy, Suite 140, Lexington, KY 40511

or

Email this form to Drew@kwpn-na.org