



**LIPIZZANER ASSOCIATION OF AUSTRALASIA**

**MICROCHIP APPLICATION**

(\$17 fee must be forwarded with this application)

**OWNER'S NAME:** (MR/MRS/MS/MISS) \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**PHONE NO:** \_\_\_\_\_ (HOME) \_\_\_\_\_ (WORK)

**OWNERS SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**HORSE'S REGISTERED NAME:** \_\_\_\_\_

**DATE OF BIRTH:** \_\_\_\_\_ **SEX:** \_\_\_\_\_

**COLOUR:** \_\_\_\_\_

**REGISTERED NAME OF SIRE:** \_\_\_\_\_

**REGISTERED NAME OF DAM:** \_\_\_\_\_

**MEANS OF IDENTIFICATION:**

1. I wish to microchip only. (Yes / No)

2. I wish to use a combination of microchip and brand. (Yes / No)

The brand/s are or will be: \_\_\_\_\_

\_\_\_\_\_

Please return to : LAA Secretary, 26 Swamp Hen Road, LAGUNA NSW 2325

**Office use only : Microchip no :** \_\_\_\_\_