



**Gypsy Horse Registry of America, Inc.**  
**Certificate of Veterinary Inspection of Stallion**  
*This certificate must accompany the registration and/or transfer form for the permanent papers of senior stallions (5 years and older) or any stallion used for breeding purposes, regardless of age.*

Name of Horse:

Registration Number:

Foaling Date:

Color:

Markings:

Height:

Owner:  
(Please print legibly)

GHRA Member No:

Address:

Tel:

Fax:

Email:

Veterinarian:  
(Please print legibly)

State & License Number:

Address:

Tel:

Fax:

Email:

***I certify that I have measured and examined the above named stallion and that he is sound with no apparent genetic defects, has a level bite and that he has two testicles normally descended in the scrotum.***

Note: *(overbite/underbite shall be no greater than the distance of one tooth thickness (buccal to lingual surface of the tooth))*


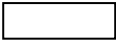
Veterinarian Signature:

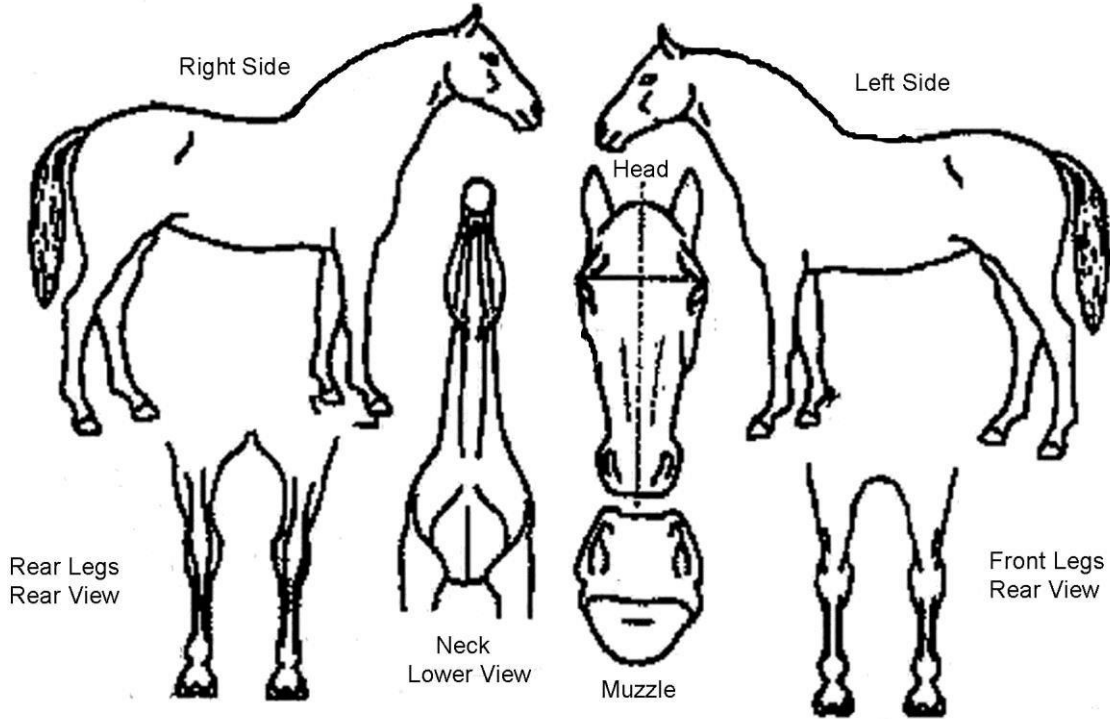
Date:

Owner Signature:

Date:

## Certificate of Veterinary Inspection of Stallion Silhouette

Please draw all white markings accurately on silhouette in red ink. Mark locations of hair whorls with an "X".  
Drawing Key : White:  Color: 



| Description                                       |             |                 |       |
|---|-------------|-----------------|-------|
| Name:   | Breed:      |                 |       |
| Sex:  | Body Color: |                 |       |
| Mane /Tail Color:                                 | Hoof Color: |                 |       |
| Permanent Markings:                               |             |                 |       |
| Freeze Brand:<br>(Insert letters/symbols/numbers) |             |                 |       |
| Microchip:<br>(Insert letters/symbols/numbers)    |             |                 |       |
| Scars:<br>(Describe type & location)              |             |                 |       |
| Description By:                                   | Date:       | GHRA Registrar: | Date: |

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