

Inspection Nomination Form

1. Owner Information

Name: _____

Address: _____

Telephone: _____ Fax: _____ Email: _____

2. Pony Information

CCPS/ACPS Registered Name: _____

Date of Birth: _____ Sex: _____ Present Colour: _____ Birth Colour: _____

FID/TFC #: _____ Permanent Registration #: _____

3. Fees

		<u>Amount</u>
Nomination Fee – <i>Before deadline</i>	Stallions	\$100 _____
	Mares/Geldings	\$75 _____
	Premium Mares	\$100 _____
Late entries	Stallions	\$200 _____
	Mares/Geldings	\$150 _____

4. Name preferred inspection site: _____

*Participants bring ponies and participate at their own risk. Nomination fees are non-refundable, but inspection of a nominated pony may be postponed for lameness, illness, or other last minute emergencies. Please do not bring sick ponies to inspection sites. If a nominated pony dies before the inspection date, another pony may be substituted. **Incomplete forms will be returned. The inspection team reserves the right to refuse to inspect any pony who presents itself in an unsafe manner to the handler, observers and/or Inspection Team.** I have read, understand and agree to these conditions.*

I agree to an oral presentation of my pony's inspection results at the inspection.*

I do not agree to an oral presentation of my pony's inspection results at the inspection.*

Signed: _____ Date: _____

Make cheques payable to and mail to the CCPS region hosting the inspection.

Instructions

1. Copy and complete this form as necessary for each pony nominated.
2. Attach a copy of the nominee's CCPS/ACPS registration certificate to each form.
3. Submit all paperwork and fees by advertised deadline for your preferred site.
4. The Veterinarian's Inspection Report Form can be downloaded from the CCPS website or requested from the regional inspection committee. This document must be completed prior to the inspection date. Note that the vet must measure the pony.
5. ON INSPECTION DAY THE VET FORM AND THE PONY'S REGISTRATION PAPERS MUST BE PRESENTED WITH THE PONY.

* We are trying to increase the educational value of inspections to spectators so would greatly appreciate your volunteering your pony for this.

Please email forms to Margot Watson at margotwatson@shaw.ca or mail 8512 Ballenas Place, Sidney, BC V8L4Y9

Veterinarian's Inspection Report Form

Stallion registration: prospects must meet all CCPS requirements for registration in the CCPS Stud Book and must be at least 2 years of age. Applicants must be free of all visible inheritable abnormalities: overshot or undershot jaw, cryptorchid or monorchid, or club feet. Halfbred colts are not eligible for registration as stallions. Only offspring born after a stallion's registration is complete (including DNA sample results lodged with CLRC and CCPS registration fees paid) are eligible for registration.

Pony Name: _____ **CCPS/ACPS Reg. No.** _____

Owner: _____

Address: _____

Phone:(____) _____

Owner's Signature _____ **Date** _____

1. Eyes: free from visible problems.
 Yes No Comments: _____
2. Mouth: Upper and lower incisors meet without a gap in such a way as to permit normal wear. An overshot or undershot mouth or any other deviation from an even bite is unacceptable. If in question, the jaw alignment must be considered
 Yes No Comments: _____
3. Skin: Free from evidence of chronic allergic conditions that could be hereditary.
 Yes No Comments: _____
4. Feet: Well formed, substantial feet, clubfoot is unacceptable. Good hoof wall with no flaking or separation.
 Yes No Comments: _____
5. Heart and lungs, with no apparent hereditary defects.
 Yes No Comments: _____
6. Reproductive anatomy for colts appears normal. Cryptorchid or monorchid is unacceptable.
 Yes No Comments: _____

Height: ____ h ____ inches. **Age at measurement:** _____

Veterinarian's Signature: _____

Veterinarian's name, printed: _____

License number: _____ **Date:** _____