



# American Warmblood Society & Sporthorse Registry

P.O. Box 38  
Berger, MO 63014  
314-384-5482  
awssr.org  
membership@awssr.org

## Request for Services

**All registrations and service requests require a current membership.**

**If you are not a current member, you will need to fill out and submit the membership application with appropriate fees along with this service request and fees. Requests without current membership will not be processed. All fees are non-refundable.**

**The preferred method of application or request is through our online portal at <http://awssr.org/service-request-form>. Fill out and save this form as a PDF, then upload to the online application portal. Payment is due at the time of application. All payments are non-refundable. If you would like to pay via credit card, you MUST use the online portal with PayPal. If you prefer to send a check, you may print this document and send it through the mail. However, please make sure that any hand-written or hand-drawn elements are legible—there is a \$50 correction fee for any mistakes (not due to AWSSR clerical error).**

**Please allow 30 days for processing.** Rush services are available for a fee. Contact AWSSR for rush services.

There are THREE main applications:

Membership Application    Registration Application    Request for Services

Also available:

Breeding/Covering Certificate

All updated forms and documents can be found at <http://awssr.org/forms-fees>





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## Please choose the service(s) you need:

- **Duplicate/Change (\$50)** \*Correction (non-clerical), change, or duplicate certificate, including performance qualifications and quality designations
- **Transfer of Ownership (\$50)**
- **5-Star Program Additional Star (\$25)** \*Entry into the 5-star program required. Cost is per star.
- **On-site Inspection (\$100)**
- **Video Inspection (\$75)**
- **Branding (\$125).** \* available at on-site inspections only, must pre-qualify with a score of 67% or higher

Subtotal:

.....

Member name: \_\_\_\_\_

AWSSR Member #:\* \_\_\_\_\_

Email: \_\_\_\_\_

\*If you are applying for membership along with this request, please put "pending" for member number

*(The following information is only necessary if different from previous membership information on file)*

Owner's farm Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Prov: \_\_\_\_\_

Country: \_\_\_\_\_

Primary phone number: \_\_\_\_\_

Type: Home  Cell  Work

By signing this document, you agree that: *To the best of your knowledge all the following information contained herein is true and correct.*

Owner's signature: \_\_\_\_\_ Date: \_\_\_\_\_



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**Check this box if you are requesting a duplicate certificate.**  
(no other information is needed other than Horse's AWSSR name or number below)

## SUPPLEMENT FOR CHANGE TO REGISTRATION

**This section is only relevant for those who are requesting a change to their registration certificate. Please fill in "Unknown" where applicable.** This information will be used for your certificate of registration – **the information you provide here (OR NOT) will be exactly reflected on your certificate!** The table of bloodlines ***must*** be filled out in its entirety, even if copies of previous registrations are provided by the owner.

Horse's AWSSR name: \_\_\_\_\_

Sired by an AWSSR Approved stallion? Yes \_\_\_ No \_\_\_

Mature height (in hands): \_\_\_\_\_ Color: \_\_\_\_\_

Sex: Stallion \_\_\_ Gelding \_\_\_ Mare \_\_\_

Foal Date: (mm/dd/yy) \_\_\_\_\_ State/Country foaled: \_\_\_\_\_

Breeder: \_\_\_\_\_ City/State: \_\_\_\_\_

(Owner of mare at the time of foaling)

### If horse was previously registered with another association†:

Registry/association name: \_\_\_\_\_

Registration #: \_\_\_\_\_ Country: \_\_\_\_\_

*†Provide a copy of any other registration papers with this application*

Registry/association name: \_\_\_\_\_

Registration #: \_\_\_\_\_ Country: \_\_\_\_\_

*†Provide a copy of any other registration papers with this application*



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Previous DNA case # (if applicable): \_\_\_\_\_

Previously activated microchip # (if applicable): \_\_\_\_\_

## **Breeding/Covering Report\***

*\*Provide a copy of the original with this application*

Date(s) of breeding: \_\_\_\_\_

Sire name: \_\_\_\_\_

Owner name: \_\_\_\_\_

Owner city: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Name of owner/agent/vet present for cover: \_\_\_\_\_

Dam name: \_\_\_\_\_

Owner name: \_\_\_\_\_

Owner city: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Name of owner/agent/vet present for cover: \_\_\_\_\_



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Sire's DNA case #: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Sire's Name - Breed - Reg # \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dam's DNA case #: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dam's Name - Breed - Reg # \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Please fill in "Unknown" where applicable.** This information will be used for your certificate of registration - **the information you provide here (OR NOT) will be exactly reflected on your certificate!** The table of bloodlines **must** be filled out in its entirety, even if copies of previous



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## SUPPLEMENT FOR TRANSFER OF OWNERSHIP

**This section is only relevant for those who are requesting a transfer of ownership.** You must supply the following information and send this application as well as the **REGISTRATION CERTIFICATE, BILL OF SALE**, and your **TRANSFER FEE** to the AWSSR national office via the online application portal or mail. If supplying via mail, please **TYPE** or **PRINT legibly**. **Buyer must be a current member.**

Date of Sale: \_\_\_\_\_

Horse's AWSSR registered name: \_\_\_\_\_

AWSSR #: \_\_\_\_\_

Sex: Stallion  Gelding  Mare

Seller's name: \_\_\_\_\_

Current or expired AWSSR Member # (if applicable): \_\_\_\_\_

Seller's farm name (if applicable): \_\_\_\_\_

Email: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Prov: \_\_\_\_\_

Country: \_\_\_\_\_ Zip code: \_\_\_\_\_

Primary phone number: \_\_\_\_\_

Type: Home  Cell  Work

Seller's Signature: \_\_\_\_\_



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Buyer's name: \_\_\_\_\_

Current AWSSR Member #: \_\_\_\_\_ \*

Email: \_\_\_\_\_

\*if you are supplying a membership application at the same time as this transfer request, please put "pending"

*(The following information is only necessary if different from previous membership information on file)*

Owner's farm Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Prov: \_\_\_\_\_

Country: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Primary phone number: \_\_\_\_\_

Type: Home  Cell  Work

Buyer's signature: \_\_\_\_\_

**THIS TRANSFER REQUEST WILL ONLY BE PROCESSED WITH COPIES OF THE ORIGINAL  
REGISTRATION CERTIFICATE AND BILL OF SALE, ALONG WITH APPROPRIATE RELATED  
FEES.**

**Please allow 30 days for processing.**



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## SUPPLEMENT FOR INSPECTION APPLICATION

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**This section is only relevant for those who are requesting an inspection.** For on-site inspections, All signed entry forms and fees must be postmarked at least 15 days prior to the inspection date to avoid a \$50.00 rush fee. For video inspections, the preferred method is to provide a high-quality video posted via **YouTube**, however we also accept DVDs or CDs with videos (avi, flv, mp4, mov, or wmv formats). **Limited to 2 reviews per horse with NO exceptions (fee required for each additional review).** *If you are supplying a membership or registration application at the same time as this transfer request, please put "pending" in the fields for AWSSR and member numbers.*

Horse's AWSSR registered name: \_\_\_\_\_

AWSSR #: \_\_\_\_\_ Foal Date: \_\_\_\_\_

Sex: Stallion  Gelding  Mare

Owner's name: \_\_\_\_\_

Current AWSSR Member #: \_\_\_\_\_

Email: \_\_\_\_\_

Web address for video (if applicable): \_\_\_\_\_

*(The following information is only necessary if different from previous membership information on file)*

Owner's farm name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State/Prov: \_\_\_\_\_

Country: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Primary phone number: \_\_\_\_\_

Type: Home  Cell  Work

I, the undersigned, understand that this is a high risk activity and that I am participating at my own risk. I assume all risk and responsibility, and release the inspection facility and the American Warmblood Society & Sporthorse Registry, inspectors, officers, directors, members, owners, agents, partners, trainers, managers, families, and/or friends and guests, horses or other property from any cause whatsoever. I further agree to hold harmless each and every person from any claim, which might arise by virtue of injury to my horses or me or caused by horses, family, guests, and/or me. The AWSSR reserves the right to refuse service to anyone. I have read the AWSSR Inspection & Breeders Guidelines (Inspection Requirements). No refunds. Credits may be applied.

Your signature also releases any photos/videos taken during the inspection for AWSSR publications, website, and promotions.

Owner/Agent/Handler signature: \_\_\_\_\_

For on-site inspections, a maximum of 25 horses and a minimum of 10 participating horses including open/registered horses are required or the inspection may be postponed. Contact organizer for stabling information, facility requirements, directions and any extra services provided.