

ACTRA Mount Registration

Print page and **mail to:** April Haliburton, 266 Maloney Road, Admiral Rock, NS B0N 2H0

Or scan and email along with eTransfer to: treasurer@atlanticriders.ca

Name of Owner: _____ ACTRA# _____

Mailing Address: _____

Email Address: _____

Home Phone: _____ Cell: _____ Other: _____

Mount's Registered Name: _____

Registry Association: _____ Number: _____

**** Please attach a *copy* of your Registry Certificate****

Barn Name: _____

Breed: _____

Year Born: _____ Sex: _____

Colour: _____

Distinguishing Markings: _____

FEE:

\$25.00 *Mount Reg. is a one-time fee per horse for the lifetime of the horse.*

 \$ **TOTAL SUBMITTED**

(Please make cheques payable to Atlantic Canadian Trail Riding Association)

~ Fees must accompany registration form to be valid ~