

ADHHA

Approved Stallion Website Information Sheet

Submission of listing information (or changes) is to be filled out by stallion owner or manager and returned to the ADHHA office, 455 E. Farver St., Shipshewana IN 46565. adhhas17@gmail.com 260 350-0988

Stallion owners are responsible to submit updated information

Stallion Name: _____ ADHHA# _____ Foal Date _____

Location of Foaling: _____ Color: _____

Sire: _____

Dam: _____

Exported: From _____ To _____

Owner (s): _____

Phone Number, if to be included: _____

Standing at: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Contact Person: _____

Phone # _____ Email: _____

Frozen Semen Available: Yes _____ No _____

STUD BOOKS ADHHA Yes _____ Date Approved _____

KWPN Yes _____ No _____

KWPN NA Yes _____ No _____

Other: _____

ADHHA Grandfathered: Yes _____ (KWPN Approved prior to Jan 1, 2014) Date Approved _____

Pictures Attached: Yes _____ or, sent via _____

Registration Papers Attached: Yes _____ or, sent via _____