



American Haflinger Registry

PO Box 2690, Akron, Ohio 44309
Ph: 330-784-0000 - Fax: 330-794-5721



Gelding Certificate

please check one

- Horse has never been registered with American Haflinger Registry
- Previously registered with American Haflinger Registry as a stallion

On _____ the horse named _____
(date)

AHR registration # _____ AHR Stallion License # _____
(if applicable)

was gelded.

As the person performing the surgery, I certify that both testicles were removed.

Print Name

Signature

Owner's Name – please print clearly

Owner's Signature

- If an unregistered foal, write the name of the dam and the foal's birthdate in the Name space.
- On an unregistered foal, this form must accompany the application for registration.
- On a previously registered stallion, please submit this form within 30 days of the surgery along with the original pedigree certificate. If the stallion was licensed for breeding, the stallion license must also be returned at the same time.