

CERTIFICATION APPLICATION FORM



APPLICATION FORM  
FOR CERTIFICATION

HORSE'S NAME: \_\_\_\_\_

GVHS #: \_\_\_\_\_ SEX: S M G AGE: \_\_\_\_\_ COLOR: \_\_\_\_\_

OWNER'S NAME: \_\_\_\_\_

FARM NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

PHONE: \_\_\_\_\_ CELL: \_\_\_\_\_

WEB SITE URL: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

By applying for certification, I agree to the following:

- I will correct any inaccuracies on my web site or advertisements that are brought to my attention.*
- My certified Gypsy Vanner Horses will only be registered with the Gypsy Vanner Horse Society.*
- I will not cross breed my certified Gypsy Vanner Horses to any other breed or non-registered Vanner.*
- I will hold Certified Horse and any inspecting veterinarians harmless from any legal actions.*
- I will deal fairly with the public.*

Signed \_\_\_\_\_ Date \_\_\_\_\_

Mail To:  
CERTIFIED HORSE  
12501 SW 8th Ave.  
Ocala, FL 34473