Office Use only
Date received:
Receipt No:

The Equestrian Federation of Australia

CHANGE OF HORSE NAME

This Form becomes a Tax invoice on payment.
(Please add state ABN from Schedule of fees).
Applications can only be accepted from Current EFA Members.

CURRENT NAME OF HORSE	REGISTRATION No

EFA Member No: _____Member Name:_____

Address:_____

_____Post Code:_____

Phone: _____Email: _____

NAME CHANGE CONDITIONS

1. The **Certificate of Registration** & current performance cards ***must accompany*** this application
2. Horse name not to exceed 28 characters including spaces.
3. Horses cannot be registered as trade names i.e. Versace, Calvin Klein or Nescafe. This is an FEI rule. However, prefixes/additional wording put in front of a trade name is acceptable i.e. Richmond Hill Versace. Prefix initials i.e. RH are not permitted.
4. Punctuation is not to be used i.e. full stops, stars etc. For example Mr Burns cannot be Mr. (full stop) Burns.
5. The word 'The' cannot be put in front of a name that is already taken i.e. If "Gladiator" is already taken, you cannot have "The Gladiator"
6. Numbers, both standard and Roman, cannot be added to the end of a name if the primary name is already in use e.g. Gladiator (currently in use) cannot be Gladiator 2, Gladiator II. (See the EFA General Regulations for exceptions)
7. Incomplete applications will be returned.

HORSE NAME - you **must** supply 5 names in preference order.

1st Preference

2nd Preference

3rd Preference

4th Preference

5th Preference

Signature of Registered Owner_____ Date:_____

COMPETITION LICENCE/REQUIRED FOR THIS HORSE: (please Tick – Check State List for availability and fees)

☐ Dressage ☐ Pony Dressage ☐ Eventing ☐ Show Horse CL fees: $_____
☐ Jumping ☐ Interschools ☐ Vaulting ☐ Reining CL fees: $_____
☐ Carriage Driving Change of Horse Name Fee: $_____
Total Payable: $_____

FEES See separate PDF document for your State's pricing list/contact details.

Total PAYMENT: $_____ cheque/money order payable to "*EFA (plus your State name)*"
or charge my *VISA /MASTERCARD* (This Service is not available in Tasmania or the Northern Territory**(MO or Chq Only)**)

Card Holders Name: _____

Signature_____ Expiry Date: ___ ___ / ___ ___

Card Number: ___ ___ ___ ___ / ___ ___ ___ ___ / ___ ___ ___ ___ / ___ ___ ___ ___

This becomes a Tax Invoice upon payment **(Please copy for your records)** **State ABN** _____

NSW PO Box 7077 Wetherill Park DC NSW 2164 Web: www.efansw.com.au **SA** PO Box 1177 Marleston SA, 5033 Web: www.sa.equestrian.org.au
NT PO Box 1244 Palmerston NT, 0831 Web: www4.tpgi.com.au/efant **Tas** PO Box 277 Brighton TAS, 7030 Web: www.tas.equestrian.org.au
Qld PO Box 1358 Coorparoo Web: www.qld.equestrian.org.au **Vic** PO Box 616 Werribee VIC, 3030 Web: www.efavic.com.au
WA State Equestrian Centre 303 Cathedral Ave Brigadoon WA 6063 Web: www.efawa.com.au