

WELSH PONY & COB SOCIETY OF AMERICA, INC.

OFFICIAL MEASUREMENT FORM

NO FEE FOR MEMBERS

\$5.00 FEE FOR NON-MEMBERS

PONY/COB NAME: _____ WPCSA REG. # _____

SEX: _____ COLOR: _____ YEAR FOALD: _____

MARKINGS (HEAD, LEGS, BODY): _____

OWNER: _____ WPCSA MEMBER: _____

ADDRESS: _____ NON-MEMBER: _____

Signature of registered owner or authorized agent
Must be at least 18 years of age

ANIMAL MUST BE MEASURED AND FORM SIGNED BY ANY TWO OFFICIALS ACTING TOGETHER: A VETERINARIAN, A JUDGE, OR A COMMISSIONER WHO IS OFFICIANTING IN THE SHOW AT WHICH THE ANIMAL IS MEASURED.

_____ 20_____

We hereby certify that we measured this animal at the _____

Show. Its height is _____ hands, _____ inches and is SHOD _____ UNSHOD _____. (If shod, height of shoe and pad measured at the heel must be deducted from the measured height.)

SHOE & PAD HEIGHT _____ LENGTH OF TOE _____ Height of heel from coronet to ground _____

Veterinarian/Judge/Commissioner

Veterinarian/Judge/Commissioner

*Payment of \$5 has been received for the measurement of the above animal

* _____
(Commissioner)