IRISH DRAUGHT HORSE SOCIETY (GB)

Registered Charity No. 1080522

CENTRAL PREFIX REGISTER APPLICATION FORM

You are advised to read the Central Prefix Register Guidance Notes before completing this form

	Owner:		Membership No.:	
	Address:			
	Postcode:		Email:	
	Telephone Mobile:		Landline:	
	Additional co-breeder (if different from own	dditional co-breeder (if different from owner):		
Ρle	ease complete the appropriate sec	tion in <u>CAPITALS</u>		
Se	ection 1: I wish to register a new p	orefix in the order of preferer	nce below: Fee £60	
1	st Choice			
2	2nd Choice			
3	ard Choice			
Se	ection 2: I wish to extend my existi	ing prefix (please provide your p	prefix name): Fee £25	
		for use with	the following Breed	
Sc	ocieties:			
	v signing below, I give consent to m nd the Central Prefix Register in acc			
Si	gned:	Da	te	
Ch	ayment options: neques - payable to Irish Draught F redit/debit card - use the Miscellane	• ` '	llaneous Payments	
PL	LEASE RETURN THIS FORM TO:			
ID	HS(GB) PASSPORTS. Holme Hou	use, The Dale, Ainstable, Ca	urlisle CA4 9RH	
En	mail <u>passports@idhsgb.org.uk</u> Tel (01768 870523 (Available 9-0	00am to 5-00pm Mon – Fri)	

CPR Application V2 CAR/Dec22