Secretary: Lesley Lewis, 530 Marshland Road, Christchurch 8083, New Zealand Phone: 03 385 6163 • Email: lewises@xtra.co.nz • Website: www.shetlandpony.org.nz

LEASE APPLICATION FORM

Refer to NZSPBS website or contact the Secretary for the current Schedule of Fees Refer to the NZSPBS Constitution & Regulations for further information

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Pony Details:	
Name:	Registered No:
Brands: Near Shoulder Off Shoulder	_
Sex: Gelding ☐ Mare ☐ Stallion ☐ (TICK ONE)	
Sire:	Registered No:
Dam:	Registered No:
I hereby acknowledge that the pony described above has been leased to:	
Mr/Mrs/Miss/Ms (FIRST & LAST NAME):	
Address:	
Email:	Tel:
On the: day of 20 and will terminate on:	day of 20
Where this Lease refers to a Mare the following particulars must be supplied:	
Mare served by the Stallion:	Registered No:
	_
On (ALL DATES OF SERVICE):	-
I hereby authorise the Lease to be recorded in the books of the So lodged with the Secretary together with the prescribed fee within 3	
Name of Lessor:	///
Signature of Lessor:	-
Address of Lessor:	
The basis of the Lease is a matter for individual negotiation between the parties. Lease Agreement, signed by both parties, is implemented. A basic template is av-	