



American Warmblood Registry North American Sportpony Registry

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Microchip Order Form

NAME: _____ DATE _____
ADDRESS: _____
CITY: _____
STATE: _____ ZIP: _____ COUNTRY: _____
E-MAIL: _____ WEBSITE: _____
PHONE: _____ CELL: _____ FAX: _____

Number of Microchips	Price per Microchip incl. EPR	Shipping
	@ \$25.00	No charges
	Total	

Microchip includes automatic Lifetime Enrollment in the Equine Protection Registry EPR.

___ Check (enclosed) ___ Money Order (enclosed) ___ VISA ___ M/C

Credit Card Number: _____

Expiration Date: _____ / _____ 3-digit security code: _____

Name as it appears on card (please print clearly): _____

Date/Signature: _____ / _____

Canadian orders must be paid by credit card.