



Loss of Animal Report

The GVHS is sorry for the loss of your horse. So that we can record the information in our system please return this form to registrar@vanners.org or mail to:

GVHS, PO Box 317, Iola, WI 54945-0317

NO FEE

Name of Registered Horse: _____

Registration Number _____ Date of Death: _____

Name _____ +

Street Address _____

City _____ State/Province _____

Postal Code _____ Telephone _____

Email address _____

For statistical and research purposes we record the reason for the loss in the GVHS database. This information may be useful to track the overall health of the breed and potentially help in future research. This information is optional but we do appreciate your support.

_____ Accident _____ Illness _____ Disease _____ Colic

_____ Foaling _____ Other

More information you would like to provide

I would like my certificate returned to me after the loss is recorded _____ YES _____ NO