

- Please do not use this form for any horse other than the one listed. **DOING SO WILL DELAY THIS REGISTRATION.**
- There are 11 steps plus photos and/or markings. To register your foal, please complete all steps, I through 11 (including the back of the application).
- Include photos and/or markings with registration papers and send to AQHA.

1 PLEASE CHECK IF ANY OF THE FOLLOWING APPLY.

- Special handling fee for 3-4 day service is enclosed. This \$40 fee is in addition to the normal registration fee and does not provide overnight delivery service. If the box is checked, please make note on the outside of your envelope: **RUSH REGISTRATION.**
- FedEx OVERNIGHT MAIL SERVICE of \$15 is included. This service is available for those who have requested special handling above. This fee is only applicable for service within the United States and does not include Saturday delivery charges. For those interested in service outside the United States and/or Saturday services, please contact our office at (806) 376-4811 for the correct fee.
- This foal was produced through EMBRYO TRANSFER. If this box is checked, you must also check the PARENTAGE VERIFICATION box.
Date embryo transferred _____
Number of embryos transferred _____
- FROZEN EMBRYO. If this box is checked, you must also check the PARENTAGE VERIFICATION box. Date of implantation: _____

- This foal was conceived using COOLED AND TRANSPORTED SEMEN. If this box is checked, you must also check the PARENTAGE VERIFICATION box.
- This foal was conceived using FROZEN SEMEN. If this box is checked, you must also check the PARENTAGE VERIFICATION box.
- DNA TYPING requested for breeding purposes. This will only establish a DNA record. It will NOT confirm parentage. Please include \$40 testing fee.
- PARENTAGE VERIFICATION requested. Please include \$40 testing fee. Sire and dam must also be DNA typed to perform parentage verification.
- HYPP TEST requested. Please include \$40 testing fee. Refer to rule 205(c) to see if this test is required.
- This foal was born SOUTH OF THE EQUATOR.
- You DO NOT want AQHA to name this foal. Unless this box is checked, AQHA will select a name if your name choices are in use or not acceptable.

2 GIVE SIX NAME CHOICES NOT TO EXCEED 20 CHARACTERS AND SPACES. DO NOT USE PUNCTUATION MARKS.

①	<input type="text"/>	②	<input type="text"/>
③	<input type="text"/>	④	<input type="text"/>
⑤	<input type="text"/>	⑥	<input type="text"/>

3 COLOR [CHECK ONE] (SEE RULE 228)

- | | | | |
|-----------------------------------|-----------------------------------|------------------------------------|-----------------------------------|
| <input type="checkbox"/> Sorrel | <input type="checkbox"/> Bay | <input type="checkbox"/> Grullo | <input type="checkbox"/> Cremello |
| <input type="checkbox"/> Chestnut | <input type="checkbox"/> Buckskin | <input type="checkbox"/> Red Roan | <input type="checkbox"/> Perlino |
| <input type="checkbox"/> Black | <input type="checkbox"/> Dun | <input type="checkbox"/> Blue Roan | <input type="checkbox"/> White |
| <input type="checkbox"/> Brown | <input type="checkbox"/> Red Dun | <input type="checkbox"/> Gray | |
| | <input type="checkbox"/> Palomino | <input type="checkbox"/> Bay Roan | |

4 GENDER [CHECK ONE]

- Stallion
- Mare
- Gelding

5 FOALING INFORMATION

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
MONTH	DAY	YEAR	CITY & STATE FOALED

SIRE _____
NAME REGISTRATION NO.

SIRE'S OWNER ACCORDING TO AQHA RECORDS AT TIME OF BREEDING

DAM _____
NAME REGISTRATION NO.

DAM'S OWNER ACCORDING TO AQHA RECORDS AT TIME OF BREEDING

NAME OF OWNER/LESSEE OF DAM WHEN FOAL WAS BORN, OR BY OWNER OF DAM AT TIME OF BREEDING IF BY EMBRYO TRANSFER.

ADDRESS _____

ADDRESS _____

CITY, STATE/PROVINCE, POSTAL CODE _____

As record owner or authorized agent of said owner of the dam at the time this horse was foaled, or at the time of breeding if by embryo transfer, I hereby certify that all information on this registration application is true and correct to the best of my knowledge, and agree that AQHA may have the privilege to correct and/or cancel the registration certificate for cause under its rules and regulations. By submitting this document to AQHA, I hereby agree to be bound by all the terms and conditions of AQHA's Official Handbook of Rules and Regulations.

6 SIGN HERE

DO NOT PRINT

WRITTEN SIGNATURE OF OWNER/LESSEE OR AUTHORIZED AGENT OF DAM WHEN FOAL WAS BORN, OR BY OWNER OF DAM AT TIME OF BREEDING IF BY EMBRYO TRANSFER.

() DAYTIME TELEPHONE NUMBER, INCLUDING AREA CODE

E-MAIL ADDRESS

BREEDER'S CERTIFICATE SECTION - Any erasure or alteration in this section will necessitate verification.

This certifies that the above listed sire and dam were bred on the following dates, including years _____

7 SIGN HERE
DO NOT PRINT SIGNATURE OF OWNER/LESSEE OR AUTHORIZED AGENT OF STALLION AT TIME OF BREEDING. AQHA ID

8 SIGN HERE
DO NOT PRINT SIGNATURE OF OWNER/LESSEE OR AUTHORIZED AGENT OF MARE AT TIME OF BREEDING. AQHA ID

BANK OF AMERICA® QUARTER HORSE RACING CHALLENGE

YES! Enroll my horse in the multi-million dollar Bank of America® Racing Challenge. Appropriate fees are included. FOR FURTHER INFORMATION CONCERNING THE RACING CHALLENGE CALL (800) 831-4447

NOMINATION FEES:

<input type="checkbox"/> WEANLING (THROUGH DECEMBER OF FOALING YEAR) . . . \$300	<input type="checkbox"/> YEARLING . . . \$ 600
	<input type="checkbox"/> TWO-YEAR-OLD . . . \$ 8,000
	<input type="checkbox"/> THREE-YEAR-OLD . . . \$ 20,000

By enrolling this horse, I hereby agree to abide by the rules of the Bank of America® Quarter Horse Racing Challenge and the general rules of the AQHA.

NOMINATOR (NAME OF OWNER) OF FOAL AQHA ID U.S. SOCIAL SECURITY OR FEDERAL TAX ID NO.

AQHA INCENTIVE FUND

YES! The sire of this foal is nominated to the AQHA Incentive Fund for the breeding season that produced it and I wish to enroll my foal. APPROPRIATE FEES ARE INCLUDED.

ANY ERASURE OR ALTERATION WILL NECESSITATE VERIFICATION. Contact us at (806) 376-4811 for further information concerning the AQHA Incentive Fund Program.

DEADLINE DATES:

<input type="checkbox"/> Foaling date to the 7 month birthdate	FEES \$100
<input type="checkbox"/> After 7 month birthdate to 12 month birthdate	\$200
<input type="checkbox"/> After 12 month birthdate to 18 month birthdate	\$1,000
<input type="checkbox"/> After 18 month birthdate to 24 month birthdate	\$2,500

NOMINATOR (NAME OF OWNER) OF FOAL AQHA ID U.S. SOCIAL SECURITY OR FEDERAL TAX ID NO.

MEMBERSHIP AND REGISTRATION FEES

AQHA MEMBERSHIP FEES

CHECK ONE:

- 12 month\$40
- 3-year\$80
- Life\$500

Membership may be purchased at time of transaction to receive immediate member benefit fees.

IF PAYING BY VISA, MASTERCARD OR AMERICAN EXPRESS, PLEASE PROVIDE THE FOLLOWING:

CARD NUMBER: _____

EXP. DATE: _____ DAYTIME PHONE: (____) _____

CARDHOLDER NAME (PRINT): _____

CARDHOLDER SIGNATURE: _____

Dues payment **MAY BE** deductible by Members as an ordinary and necessary business expense; however, contributions or gifts to the American Quarter Horse Association are **NOT** deductible as charitable contributions for federal income tax purposes. However, donations to the American Quarter Horse Foundation **ARE** tax deductible to the extent allowed by law. Through the payment of a membership fee to AQHA, I acknowledge that membership in AQHA is voluntary and I agree to be bound by all the terms and conditions of AQHA's Official Handbook of Rules and Regulations.

REGISTRATION FEES

REGISTRATION FEES ARE BASED ON FOALING DATE AND DATE APPLICATION IS RECEIVED.

EXAMPLE: FOALING DATE: FEBRUARY 15

7 MONTH DEADLINE: SEPTEMBER 15

	MEMBER	NON-MEMBER
FOALING DATE TO 7 MO. BIRTHDATE	\$25 <input type="checkbox"/>	\$65 <input type="checkbox"/>
AFTER 7 MO. BIRTHDATE TO 12 MO. BIRTHDATE	\$50 <input type="checkbox"/>	\$90 <input type="checkbox"/>
AFTER 12 MO. BIRTHDATE TO 24 MO. BIRTHDATE	\$125 <input type="checkbox"/>	\$165 <input type="checkbox"/>
AFTER 24 MO. BIRTHDATE TO 36 MO. BIRTHDATE	\$300 <input type="checkbox"/>	\$340 <input type="checkbox"/>
AFTER 36 MO. BIRTHDATE TO 48 MO. BIRTHDATE	\$550 <input type="checkbox"/>	\$590 <input type="checkbox"/>
AFTER 48 MO. BIRTHDATE	\$1,000** <input type="checkbox"/>	\$1,040** <input type="checkbox"/>

** Parentage Verification required prior to registration on horses over 48 months of age.

- OPTIONAL - SPECIAL HANDLING FEE PER REGISTRATION - 3-4 DAY SERVICE (IN ADDITION TO REGULAR FEE. DOES NOT INCLUDE OVERNIGHT DELIVERY) \$40
- OPTIONAL - OVERNIGHT MAIL FEE (SPECIAL HANDLING FEE MUST ALSO BE SELECTED) ... \$15
- OPTIONAL - GENETIC TESTING FEE \$40

• U.S. FUNDS ONLY • FEES SUBJECT TO CHANGE • DO NOT SEND CASH •

TOTAL DUE/ENCLOSED

Say Goodbye to Renewal Notices - Have your membership automatically renewed on the credit card you've provided. Nothing will lapse if you auto-renew - plus we'll hold your annual membership renewal dues at \$35 for three years. You can cancel at any time.

If you prefer not to have your membership renew automatically, check here.

DRAW IN MARKINGS

H
DRAW IN HEAD MARKINGS

- MARKINGS ON SIDES OF HEAD AND CHIN must be drawn on diagram.
- OUTLINE ALL WHITE MARKINGS of horse being registered with dark solid lines.
- DRAW ALL SCARS AND BRANDS so that markings can be traced onto registration certificate.
- Clear photographs of horse's markings may speed processing.

RIGHT SIDE VIEW

LEFT SIDE VIEW

DRAW IN EVERY WHITE AREA

INDICATE ALL DARK SPOTS WITHIN WHITE AREAS

REAR VIEW

FRONT VIEW

WRITTEN DESCRIPTION OF MARKINGS (SEE RULE 229)

11 **MARKINGS [CHECK APPLICABLE]** HORSE HAS NO MARKINGS HORSE HAS DORSAL STRIPE

HORSE COLOR _____

H ON HEAD _____

EYE COLOR _____

L1 LEFT FORE LEG _____

R2 RIGHT FORE LEG _____

L3 LEFT HIND LEG _____

R4 RIGHT HIND LEG _____

OTHER UNUSUAL MARKINGS OR COLOR, INCLUDING WHORLS _____

COLOR OF MANE AND TAIL _____

SCARS AND BRANDS, LIST NAME OF BRAND _____

CHECK IF BRAND IS A FREEZE BRAND: