

Corrected Certificate

FOR OVERNIGHT DELIVERY TO AQHA: 1600 QUARTER HORSE DR, AMARILLO, TX 79104 • MAILING ADDRESS: P.O. BOX 200, AMARILLO, TX 79168
WWW.AQHA.COM • ☎ 806-376-4811 • FAX: 806-349-6405 Español ☎ 806-373-2281



INSTRUCTIONS: * PLEASE READ CAREFULLY * A delay in processing will result if information is omitted.

1. Original Certificate must accompany this form.
2. Reverse side must be completed in its entirety, indicating the color, sex and all markings, scars, brands and tattoos.
3. **Four full-view color photographs (front, back and both sides) are *required* in all instances. Not returnable.**
4. AQHA retains the right to require additional information and/or photographs before issuing a corrected certificate.
5. If a change in ownership needs to be made, include a properly completed transfer report with appropriate fees.

➔ Please regard this as a request for issuance of a corrected certificate for:

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HORSE'S NAME

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REGISTRATION NUMBER

To be completed by owner on AQHA's records.

I, _____, as the record owner, or the authorized agent for the record owner, of the American Quarter Horse stated above, state that the horse herein described is living on this date, and that the drawings shown on the reverse of this document are true, correct and actual of the horse whose name and registration number are shown above. 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*.

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SIGNATURE OF RECORD OWNER OR AUTHORIZED AGENT

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AQHA ID#

ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

DAYTIME TELEPHONE NUMBER _____

E-MAIL ADDRESS _____

Please mail certificate to:

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NAME

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AQHA ID#

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ADDRESS

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CITY

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STATE/PROVINCE/COUNTRY

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ZIP CODE

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DAYTIME TELEPHONE NUMBER

★ **IMPORTANT** ★

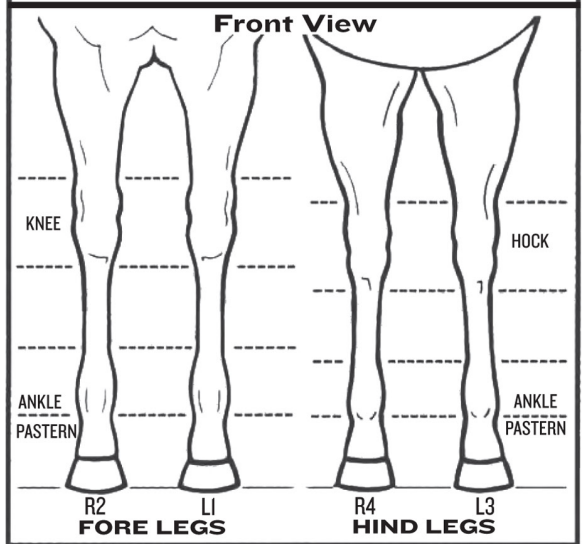
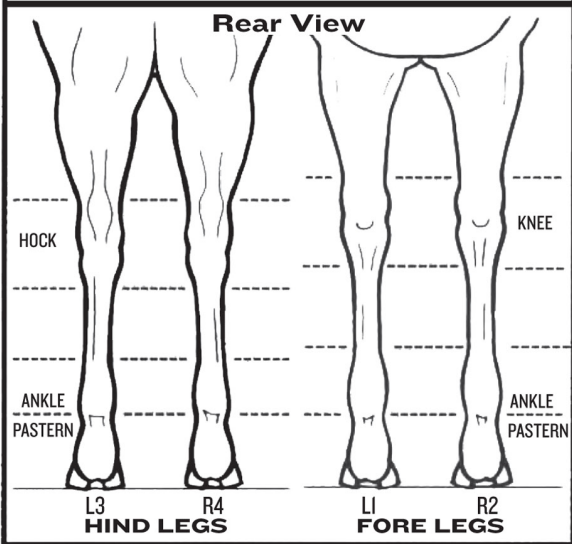
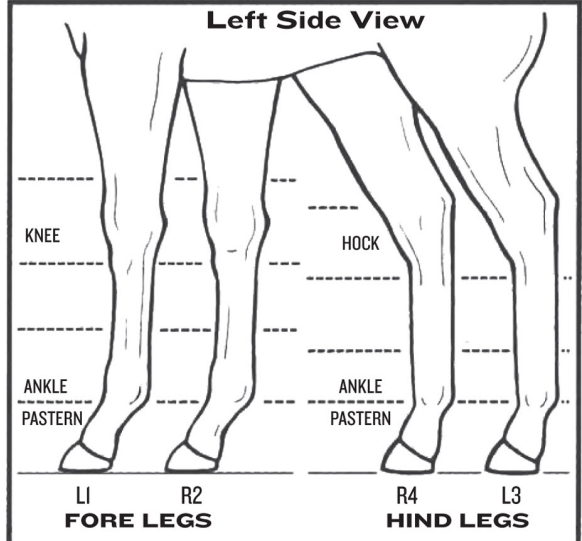
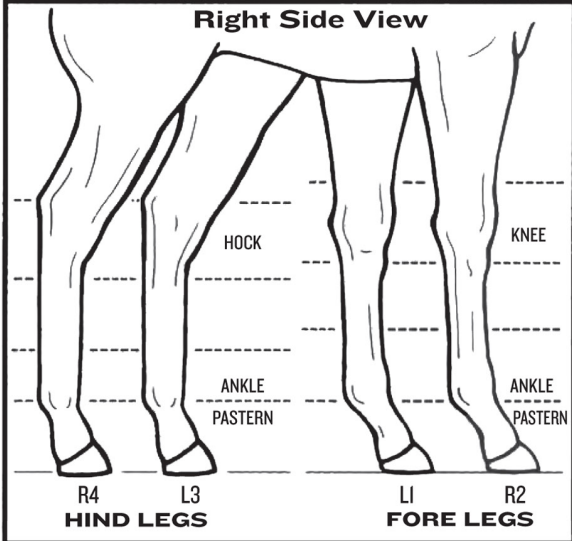
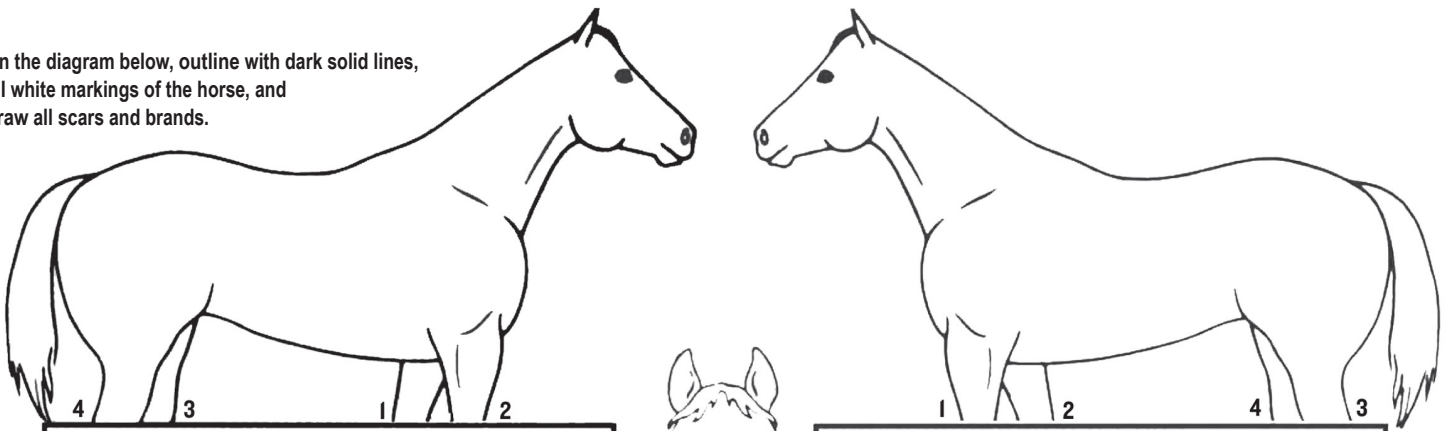
★ **Make correction on the reverse side of this form, including color, sex, and ALL markings, scars, brands and tattoos.** ★

FEES	FEES SUBJECT TO CHANGE WITHOUT NOTICE.
CORRECTION FEE:	Member \$15 Non-Member \$15
<input type="radio"/> OPTIONAL: Special Handling for 2-day service	\$100 \$100
<small><i>This fee is in addition to the regular fee. Please place "RUSH" on the outside of the envelope.</i></small>	
<input type="radio"/> OPTIONAL: OVERNIGHT service	\$20 \$20
<small><i>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 for the correct fee.</i></small>	
<small><i>Dues payments 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. \$1 of your annual membership dues is designated for a subscription to AQHA's official member publication. 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</i></small>	

<input type="checkbox"/> CHECK <input type="checkbox"/> MONEY ORDER	IF PAYING BY CREDIT CARD, PLEASE COMPLETE THE FOLLOWING:																														
AMERICAN EXPRESS <input type="checkbox"/> MASTERCARD <input type="checkbox"/> VISA <input type="checkbox"/>																															
<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td></tr> </table>																<table border="1" style="width: 100%; height: 20px; border-collapse: collapse;"> <tr><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td><td style="width: 12.5%;"> </td></tr> </table>															
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CARDHOLDER SIGNATURE	BILLING ZIP CODE																														

DO NOT SEND CASH • U.S. FUNDS ONLY

On the diagram below, outline with dark solid lines, all white markings of the horse, and draw all scars and brands.



MARKINGS (FILL IN IF APPLICABLE) – WRITTEN DESCRIPTION OF HORSE:

Horse Color _____ Eye Color: _____ Sex _____ GELDED Yes (DATE GELDED IF KNOWN) ____/____/____

H Markings on Head _____

L1 Left Fore Leg: _____

R2 Right Fore Leg: _____

L3 Left Hind Leg: _____

R4 Right Hind Leg: _____

Color of Mane and Tail: _____ Other or Unusual Markings or Color: _____

Scars, Brands and Tattoos: _____ If Branded, please provide the name: _____