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<input type="checkbox"/> Check or Money Order enclosed. DO NOT SEND CASH Check # _____ Date: _____
<input type="checkbox"/> Visa MasterCard Discover or AMEX _____/_____/_____/_____ Expiration Date: ____/____ CVC Code: _____ Daytime Phone: _____ Cardholder's Name _____ Card Holder's Signature _____

AFFIDAVIT FOR DUPLICATE CERTIFICATE

INSTRUCTIONS

1. Affidavit must be completed by owner on ARHA records. Must be a current member. Current membership fees are \$35.
2. Two full color photographs (one profile of each side) are required in all instances. Photos are not returnable.
3. Remit \$25.00 fee with affidavit and required paper work. Rush fees not included. All fees are non-refundable or transferable.
4. A duplicate certificate may not be issued if the original certificate is still in existence. If the original is found at a later date, the duplicate certificate must be returned to ARHA with an explanation.
5. Form must be notarized.
6. You must include a copy of the horse's breed registration papers.
7. ARHA retains the right to require additional information and/or photographs before issuing a duplicate certificate.
8. If a change of ownership needs to be made, include a properly completed transfer report, membership application with appropriate fees.
9. Certificate will be mailed to the recorded owner of horse.

The undersigned requests issuance of a duplicate Certificate Of Eligibility (registration) in consideration thereof agrees for themselves and their transferees that same shall be cancelable by the American Ranch Horse Association, Inc. at its option, in the event of any dispute raised by the former or current registered owner(s) or their transferees. The certificate is the property of ARHA and any alterations of information, signatures, numbers, etc, or failure to complete any transfers, and/or reclassifications within the applicable time limits will render the certificate invalid. Any certificate that is written upon, mutilated, damaged, soiled, staples. Punched, or otherwise altered becomes an invalid document, mandating that a duplicate certificate issued.

Registered Name Of Horse: _____ ARHA #: _____
 (Must include a copy of horse's breed association papers) (Leave blank if unknown)

Signature(s) of the owner(s) of horse indicated above: _____

Printed name(s) and address of the above owner(s): _____

Date of Signatures above: _____ ARHA Membership ID #: _____

Day Phone: _____ Email: _____

NOTARY PUBLIC Sworn to before me this _____ day of _____, _____

My Commission expires: _____

State Of: _____ County of: _____

STAMP OR SEAL

This form must be notarized and completed in its entirety.