

REGISTRATION APPLICATION

1600 Quarter Horse Drive • Amarillo, TX 79104
PO Box 200, Amarillo, TX 79168 • 806-376-4811
registration@aqha.org • www.aqha.com

RUSH FEE for expedited service* **\$100**

*In addition to the registration fee and does not provide expedited lab processing or overnight mail delivery.

Please notate RUSH on the outside of envelope if mailing to AQHA.

- ▶ **Payment is required at the time of processing and in U.S. funds only.**
- ▶ **An office processing fee will be charged on all work not processed to completion.**

OPTIONAL MAILING CHOICES

- OVERNIGHT mail for U.S. \$35
- OVERNIGHT mail for International \$75
- 2-day mailing within the U.S. only \$20

A physical address is needed if you select one of these options.

1 NAME CHOICES *Name choices cannot exceed 20 characters or spaces.*

1) _____ 2) _____

I DO NOT WANT AQHA TO NAME THIS FOAL. *If this box is not checked, a name will be selected if your choices are in use, unavailable or inappropriate.*

2 COLOR *(Check one only)*

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

Note: _____

3 GENDER

- Stallion Mare Gelding

4 DATE OF BIRTH

____ / ____ / ____
MM DD YYYY

5 STATE/COUNTRY BORN

DAM: _____ **Reg No** _____ **SIRE:** _____ **Reg No** _____

Dam Owner's Name: _____ **Sire Owner's Name:** _____

SIGNATURES NEEDED

6 X PLEASE SIGN HERE

SIGNATURE of owner of Dam at time of foaling *

AQHA ID: _____

ADDRESS: _____

PHONE: _____

EMAIL: _____

** 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. Refer to REG102 for requirements of who must sign an application for registration.*

If I am a required signatory and I sign area 6, 7 and/or 8, I understand that my signature may be used to satisfy the signature requirements of the other applicable areas.

BREEDER'S CERTIFICATE *By signing this section, you certify that the sire and dam listed were bred on the specified dates. Alteration in this section will require verification.*

BREEDING DATES:

____ / ____ / ____ - ____ / ____ / ____
MM DD YYYY MM DD YYYY

7 X PLEASE SIGN HERE

SIGNATURE of owner/lessee/authorized agent of Stallion at the time of breeding

AQHA ID: _____

8 X PLEASE SIGN HERE

SIGNATURE of owner/lessee/authorized agent of Dam at the time of breeding

AQHA ID: _____

9 ADDITIONAL INFORMATION:

No, my foal is not an embryo. The foal was carried.

Yes, foal produced by Embryo Transfer

Yes, foal produced by Frozen Embryo

Date of Implantation: _____

If Yes is indicated for any of the above, the below will apply:

- **\$100 embryo foal fee • DNA/Parentage Verification**
- **Dam must be enrolled in the embryo program**

A permit is being used to register the foal.

Permit No: _____

If this box is checked, a properly signed permit must accompany this application

10 FEES *SUBJECT TO CHANGE WITHOUT NOTICE*

GENETIC TESTING

- | | |
|--|-------|
| <input type="checkbox"/> DNA & PARENTAGE VERIFICATION | \$55 |
| <input type="checkbox"/> EMBRYO | |
| <input type="checkbox"/> FROZEN SEMEN | |
| <input type="checkbox"/> OVER 48 MONTHS; PV REQUIRED | |
| <input type="checkbox"/> TRANSPORTED SEMEN | |
| <input type="checkbox"/> DNA/PV FOR ANOTHER REASON | |
| <input type="checkbox"/> DNA/PV & GENETIC HEALTH PANEL | \$120 |
| <input type="checkbox"/> HYPP TEST | \$50 |
| <input type="checkbox"/> GENETIC HEALTH PANEL | \$100 |
| <input type="checkbox"/> COAT COLOR PANEL | \$95 |

For other color testing options, visit aqha.com

RANCHING HERITAGE CHALLENGE ENROLLMENT

YES! Enroll my RHB-eligible horse in the Ranching Heritage Challenge!

NOMINATION FEES:

- Full Enrollment - \$310 or Weanling - \$10
- Yearling - \$50 2-Yr-Old-\$100 3-Yr-Old - \$150

For more information, including eligibility requirements, visit www.aqha.com.

BANK OF AMERICA QUARTER HORSE RACING CHALLENGE

YES! Enroll my horse in Bank of America Racing Challenge.

For detailed information, call 877-222-7223.

NOMINATION FEES:

- Weanling (through December of foaling year) \$300
- Yearling \$600
- 2-year-old
 - o January 1 – March 15 \$2,500
 - o March 16 – December 31 \$8,000
- 3-Year-old & up \$20,000

By enrolling, I hereby agree to abide by the rules of the Racing Challenge and general rules of AQHA.

DEMOGRAPHICS – What was your breeding intention?

- Racing
- Ranching/Rodeo
- Showing
 - Cattle Classes
 - English Classes
 - Halter/Performance Halter Classes
 - Western Pleasure
- Timed Events/Speed Events
 - Barrel Racing/Pole Pending
 - Team Penning/Ranch Sorting
 - Cowboy Mounted Shooting
- Trail Riding/Recreation/Leisure
- Other _____

REGISTRATION Fees are determined by the age of the horse at the time the application is received in AQHA's office.

Fees for Current Member

Foaling Date to 7-month birthdate	\$50
After 7-month birthdate to 12-month birthdate	\$75
After 12-month birthdate to 24-month birthdate	\$170
After 24-month birthdate to 36-month birthdate	\$300
After 36-month birthdate to 48-month birthdate	\$400
After 48-month birthdate	\$500

AQHA MEMBERSHIP The owner of the foal, as determined by REG102, must be a member at the time the application is submitted to receive member fees. Membership will be added if it is expired.

SELECT ONE:

- 3 Year \$160 12 Month \$65 Life \$1,250

For other membership options, visit www.aqha.com

CHECK MONEY ORDER **IF PAYING BY CREDIT CARD, PLEASE COMPLETE THE FOLLOWING:**

- VISA MASTERCARD AM EX DISCOVER

_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|

CARD NUMBER

_____|_____|_____|

EXP. DATE (MMYY)

_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|

DAYTIME PHONE

_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|

CARDHOLDER NAME

_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|_____|

CARDHOLDER SIGNATURE

_____|_____|_____|_____|

BILLING ZIP CODE

Please be advised all payments will be assessed a nonrefundable transaction fee of 2.5%, effective May 1, 2022. AQHA reserves the right to waive the fee if payment is submitted by check or money order.

CREDIT CARD WILL BE BILLED FULL BALANCE OF SELECTED AND APPLICABLE FEES.

DO NOT SEND CASH • U.S. FUNDS ONLY

Dues payments MAY BE deductible by members as ordinary and necessary business expenses; 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. A portion of your annual membership dues is designated for a subscription to The American Quarter Horse Journal, 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 AQHA's Official Handbook of Rules and Regulations.

MARKINGS

On the diagram below, draw all white markings of your horse along with any scars or brands. You may also choose to provide quality photos of the horse clearly showing all markings. Any physical media provided to AQHA will not be returned to you.

SELECT ANY THAT APPLY:

- Horse has **NO MARKINGS** Horse has a dorsal stripe Horse has excessive white markings

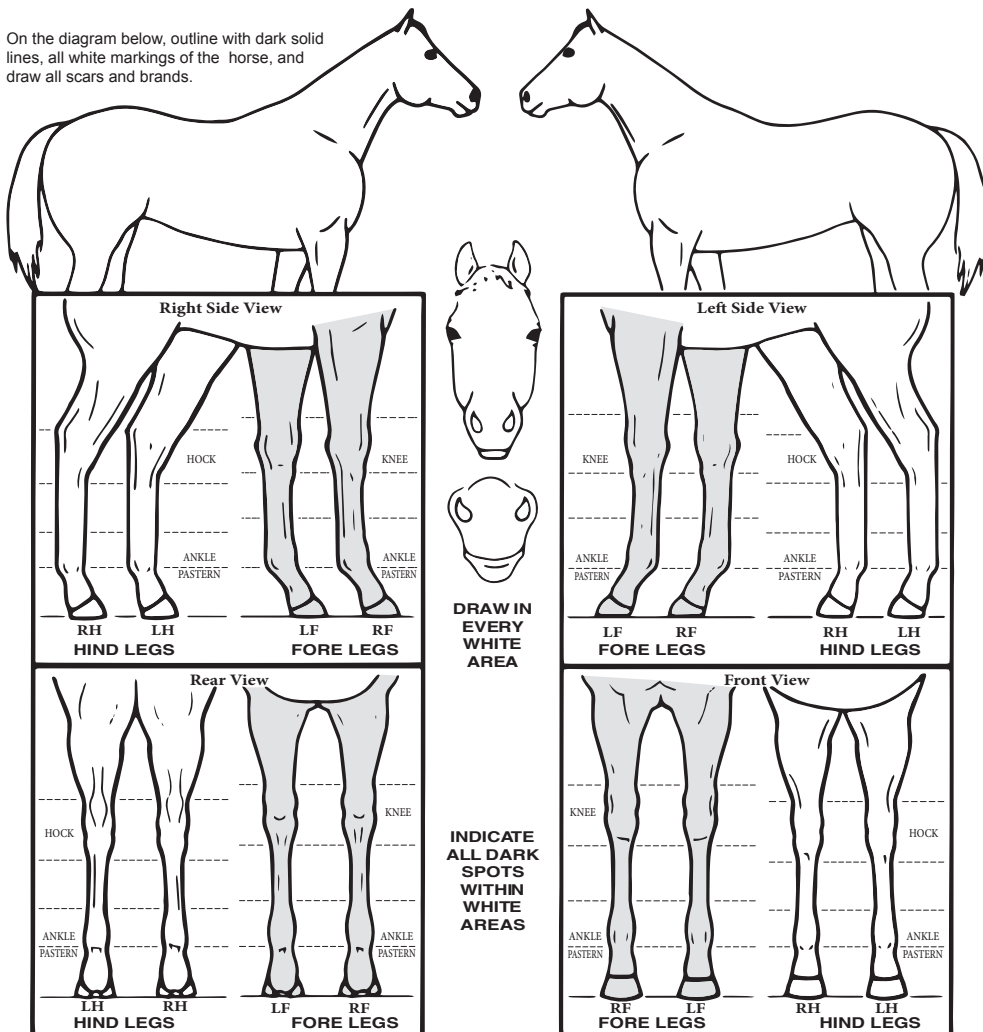
Microchip number (place manufacturer label **HERE**, if possible)

Location of microchip

Scars and/or brands - list location on horse

Other unusual markings or color

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



DRAW IN EVERY WHITE AREA

INDICATE ALL DARK SPOTS WITHIN WHITE AREAS

WRITTEN DESCRIPTION

Head

Left Fore Leg

Right Fore Leg

Left Hind Leg

Right Hind Leg

Color of Horse

Color of Mane and Tail

Left Eye Color

Right Eye Color