

Request for Semen Transportation Permit



ARABIAN
HORSE ASSOCIATION

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ArabianHorses.org
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I hereby acknowledge that I have read and agree to be bound by and follow the Arabian Horse Association's Rules and Regulations pertaining to transported and stored semen. I also understand that AHA will investigate non-compliance with these Rules and Regulations and, in the event of such non-compliance, any resultant foals may be ineligible for registration and penalties provided under Chapter 10, REG 111 may be imposed.

Specifically, I acknowledge that I understand the following with respect to this Request for Semen Transportation Permit and to the registration of foals resulting from the use of transported or stored semen collected from this stallion:

1. The DNA type of the stallion must be on permanent record with the Registry before the permit will be issued;
2. The collection and storage, or the collection and transportation, of semen from the stallion prior to the issuance of a permit for the stallion is prohibited and will result in the assessment of the **Late Permit Fee** of \$1,000;
3. The stallion must have a valid permit or Transported-Stored Semen Service Certificates will not be issued;
4. One (1) Transported-Stored Semen Service Certificate is required to register a foal conceived using semen that has been transported or stored; and
5. The permit will expire upon the exportation or change in recorded ownership of the stallion.

NOTE: Stallion owners must ensure that they have purchased a sufficient number of Transported-Stored Semen Service Certificates prior to the change in recorded ownership or exportation of the stallion. Once the recorded ownership of the stallion changes or the horse is exported, the stallion's Semen Transportation Permit will expire and the former stallion owner may no longer purchase Transported-Stored Service Certificates.

Unused Transported-Stored Semen Service Certificates may be returned to AHA for partial redemption.

Stallion Name

Registration Number

Owner number

Signature of Recorded Owner (or Authorized Agent)

Date

Please mail permit to address below:

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|------|
| Name |
|------|

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|---------|
| Address |
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|------|-------|-----|
| City | State | Zip |
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Transported/Stored
Semen Permit Fee - \$350.00 \$