## **TRUST Signature Authorization Form**



**Instructions**: For the Arabian Horse Association's purposes, a trust is a declaration that specified property will be held in trust for a beneficiary. This trust authorization form must be completed by the trustee of the trust.

	RECORD	ED OWNER INFORM	MATION
Owner/Trust Name		Owner/Member #	
Address			
City		State/Prov	Zip Code
Phone #	Fax #		E-Mail
	AUTHO	RIZATION INFORMA	ATION
			listed above. This person(s) is authorized to sign all horses recorded in this ownership, and to deliver
Name of Authorized Person (type or print)			Title (if applicable)
Signature of Authorized Person			Date
Name of Authorized Person (type or print)			Title (if applicable)
Signature of Authorized Person			Date
		AFFIRMATION	
I affirm I am Trustee of the re	ecorded owner/trust listed ab	oove, and possess full leg	al power and authority to make this authorization.
I acknowledge and agree the recorded owner.	e signature of <i>any one</i> autho	rized person will be suffic	ient to transact business with AHA on behalf of this
I agree that this authorization revocation is received by AH		receipt by AHA and will re	emain in effect until a written notice of change or
Trustee Name (type or pri	nt)		
Trustee Signature			 Date