HALF-ARABIAN / ANGLO-ARABIAN HORSE REGISTRATION APPLICATION

**HORSE INFORMATION**

<table>
<thead>
<tr>
<th>Foaling Date</th>
<th>Month</th>
<th>Day</th>
<th>Year</th>
</tr>
</thead>
</table>

**Name Requested (Maximum of 21 letters or spaces.)**

**Body Color:**  
- Bay  
- Grey  
- Chestnut  
- Buckskin  
- Dun  
- Palomino  
- Black  

Photographs are required for the following color selections and/or patterns:  
- Black Bay  
- Brown  
- Liver Chestnut  
- Grullo  
- Tobiano  
- Overo  
- Leopard  
- Blanket  
- Snowflake  
- Roan

**Breed (List Breed Registry or "Grade")**  
- SIRE:  
- DAM:  

*For Half-Arabs, one parent must be a registered purebred Arabian with the Arabian Horse Registry or the Canadian Arabian Horse Registry. Additionally, the non-Arabian parent cannot be an "unregistered" purebred Arabian, registered Anglo-Arabian or registered Thoroughbred. Anglo-Arabian applications must be accompanied with a copy of the Certificate of Registration for the Thoroughbred parent. For Half-Arabian applications, please submit a copy of the current Certificate of Registration for the non-Arabian parent (if registered).*

**RECORDED OWNER OF DAM AT TIME OF FOALING**

<table>
<thead>
<tr>
<th>AHA Membership #</th>
<th>Name</th>
<th>Address</th>
<th>City</th>
<th>State</th>
</tr>
</thead>
</table>

| Phone | Fax | Email |

I certify that the above listed pedigree and particulars are correct to the best of my knowledge and belief. I further agree that the foal will be subject to registration requirements as described in the AHA Handbook.

**Signature**  
**Date**

**RECORDED OWNER OF DAM AT TIME OF BREEDING**

<table>
<thead>
<tr>
<th>AHA Membership #</th>
<th>Name</th>
<th>Address</th>
<th>City</th>
<th>State</th>
</tr>
</thead>
</table>

| Phone | Fax | Email |

I certify that the mare listed above was bred to the stallion listed above.

**Signature**  
**Date**

**RECORDED OWNER OF SIRE AT TIME OF BREEDING**

<table>
<thead>
<tr>
<th>AHA Membership #</th>
<th>Name</th>
<th>Address</th>
<th>City</th>
<th>State/Prov.</th>
<th>Zip/Postal</th>
</tr>
</thead>
</table>

**E-Mail**

I certify that the mare listed above was bred to the stallion listed above on the service dates I have provided.

**Signature**  
**Date**

All applications and registrations are subject to AHA’s Rules and Regulations. All persons completing or signing any portion of this application, or submitting this application, agree to abide and be bound by the Rules and Regulations. An incorrect certification may result in rejection or cancellation of this registration and in appropriate cases, disciplinary action against the persons involved. **Verification of parentage to purebred Arabian parent is required on foals 2 years of age and older. (See AHA rules for further information).**
DRAW MARKINGS -or-  □  NO WHITE MARKINGS ON FACE OR LEGS

**TRANSFER**

If this horse is to be registered in a name other than the recorded owner of the dam at the time of foaling, please complete the following. Transfer fee is $15 per transfer recorded.

- Dam name __________________________________________ Registration # ____________________________
- Sire name __________________________________________ Registration # ____________________________
- Foaling date: ________/______/_______
- Sale date: ________/______/_______

**Transfer ownership to:**

- Name ____________________________________________ Member # __________________________
- Address __________________________________________
- City __________________________ State ___________ Zip __________
- Phone __________________________ Day Phone __________________________
- Fax __________________________ Email __________________________

I (we) certify that all information above is correct to the best of my (our) knowledge and belief. I (we) further agree to transfer ownership of this horse to the person(s) listed above.

**Signature**

(recorded owner of the dam at time of foaling ("and" ownership requires ALL signatures)

**FEES**

Please logon to www.ArabianHorses.org for a current fee schedule or contact us at 303-696-4500.

<table>
<thead>
<tr>
<th>Date of birth to 6 months</th>
<th>Member $50</th>
<th>Non-Member $100</th>
</tr>
</thead>
<tbody>
<tr>
<td>6 months to 12 months</td>
<td>Member $65</td>
<td>Non-Member $115</td>
</tr>
<tr>
<td>12 months to 24 months</td>
<td>Member $100</td>
<td>Non-Member $150</td>
</tr>
<tr>
<td>After 24 months (Non refundable)</td>
<td>Member $200</td>
<td>Non-Member $250</td>
</tr>
<tr>
<td>Transfer of ownership</td>
<td>Member $15</td>
<td>Non-Member $15</td>
</tr>
</tbody>
</table>

(Prices subject to change)