



# TRANSFER APPLICATION

Membership or Non-member fee is required to register a horse into a new owner(s) name. Memberships may be purchased at the same time of transaction to allow benefit of member fees. Memberships are nonrefundable and expire after 12 months. Additional information requiring rules, regulations, policies and other matters pertaining to PHBA events and programs are found in the PHBA Office Handbook, and online at www.palominohba.com. All fees are subject to increase.

### MEMBERSHIP FEES

|  |          |   |
|--|----------|---|
| Individual adult   | \$50.00  | Yth Scholarship & Educational Fund \$ _____   |
| Three year   | \$130.00 | PHBA Heritage Foundation \$ _____             |
| Joint (2 adults)   | \$100.00 | (Donations may be eligible for tax deduction) |
| Life Time  | \$500.00 |   |
| Amateur or Novice Amateur - (add to individual adult-Per Year) | \$15.00  |   |
| Youth  | \$20.00  |   |
| Novice Youth   | \$20.00  |   |

### TRANSFER FEES (Non-Refundable)

### RUSH FEES (Additional fee to rush – Non refundable)

### OVERNIGHT SERVICES – Please circle one

|   |         |  |          |                               |
|---|---------|--|----------|-------------------------------|
| Postmarked within sixty (60) days of purchase | \$20.00 | 2 week rush                            | \$25.00  | US POSTAL - \$25.00           |
|   |         | 72 Hour                                | \$50.00  | UPS - \$45.00                 |
|   |         | 2 Week Prior to & including World Show | \$100.00 | FED-EX - \$50.00              |
|   |         |  |          | Shipping fees are approximate |

Above fees are discounted for check/cash paying customers Visa, MasterCard & Discover ONLY

### CREDIT CARD INFORMATION

Credit Card Number: \_\_\_\_\_ Expiration date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Print card holder's name: \_\_\_\_\_

Card holder's Signature: \_\_\_\_\_

### TRANSFER INFORMATION

Verify that the owner of record on the transfer form is the name on the certificate of registration. The markings of the horse should be verified with the Certificate of registration. Any erasure or alteration of this form will necessitate verification.

PHBA registered Name: \_\_\_\_\_ PHBA registration number: \_\_\_\_\_

Date of sale: (month/day/year) \_\_\_\_/\_\_\_\_/\_\_\_\_ If Gelded, date of Gelding: (month/day/year) \_\_\_\_/\_\_\_\_/\_\_\_\_

As Owner, I hereby authorize PHBA to record the transfer of ownership on this horse and certify that all information on this transfer of ownership on this horse and certify all information on this transfer application true and correct to my personal knowledge. I further agree that the Palomino Horse Breeders of America has the privilege to correct and/or cancel the registration certificate for cause under its rules and regulations, as well as, to cooperate with any documentation requested by PHBA. A copy (front and back) of recognized breed association certificate of registration maybe required to be submitted to PHBA, showing the owner's name before the certificate of registration will be issued.

### BUYERS INFORMATION

Print Buyers Name: \_\_\_\_\_

Buyers Signature: \_\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Buyers PHBA ID Number: \_\_\_\_\_ APA: (Affiliate Palomino Association) \_\_\_\_\_  
(Leave blank if unknown) Leave blank if unknown

Buyers Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Fax: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ E-Mail address \_\_\_\_\_

A record of all changes in ownership on registered horses shall be made. It shall be the duty of the seller of any horse to forward promptly the transfer application and original certificate of registration along with the proper fees directly to PHBA.

### SELLERS INFORMATION

Print Seller's Name: \_\_\_\_\_ Seller's Signature: \_\_\_\_\_

Seller's PHBA ID Number: \_\_\_\_\_ Sellers Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Fax: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ E-Mail address: \_\_\_\_\_

### If consigned to auction sale, please provide the following information

Name of sale company: \_\_\_\_\_ Date of sale: \_\_\_\_/\_\_\_\_/\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_