

# ARHA Transfer Report



American Roan Horse Association Instructions:

1. Print or type all requested information.
2. The color and markings of the horse should be verified with the Certificate of Registration.
3. Any erasure or alteration on this report may necessitate verification.
4. The Certificate of Registration should list the owners as the person selling the horse.
5. Consult the ARHA regarding transfer rules at [www.ridearohan.com](http://www.ridearohan.com).
6. Remit appropriate fees, Transfer Report, membership application (if applicable) and the **Original Certificate of Registration** to ARHA.

I/We certify that the horse registered with the American Roan Horse Association as described on the Certificate of Registration delivered to ARHA in conjunction with this Transfer Report. We authorize ARHA to record the transfer of ownership of the horse upon ARHA's receipt of all required transfer items.

Gelded: YES\_\_\_ date if known \_\_\_/\_\_\_/\_\_\_ NO\_\_\_

**Horses Name** \_\_\_\_\_ **ARHA Registration Number** \_\_\_\_\_

If this transfer is for an unregistered foal, indicate year foaled, name and registration numbers of sire and dam.

Year foaled \_\_\_\_\_ Sire \_\_\_\_\_ Dam \_\_\_\_\_

**Date of Sale** \_\_\_/\_\_\_/\_\_\_ List month, day, and year possession of horse actually changed.

**Sold To (BUYER'S name)** \_\_\_\_\_ **Buyers ARHA ID#** \_\_\_\_\_

Buyer must have a current membership in exact name listed above or pay a nonmember transfer fee. Buyer's name must not 30 characters and contain only letters, spaces and punctuation.

Buyer's address Street or Box number \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
(\_\_\_\_\_) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Buyer's Home telephone number \_\_\_\_\_ Buyer's Daytime telephone number \_\_\_\_\_ Buyer's E-mail address \_\_\_\_\_

I/We further certify the horse being sold is the same as described on Certificate of Registration delivered to ARHA with this transfer.

**Written Signature of Seller** x \_\_\_\_\_

**Printed Name of Seller** \_\_\_\_\_ **Seller's ARHA ID#** \_\_\_\_\_

Seller's Address- Street or Box number \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
(\_\_\_\_\_) \_\_\_\_\_ (\_\_\_\_\_) \_\_\_\_\_  
Seller's Home telephone number \_\_\_\_\_ Seller's Daytime telephone number \_\_\_\_\_ Seller's E-mail address \_\_\_\_\_

Required: If consigned to auction sale, please give name, date and mailing address of Sale Company

Company Name \_\_\_\_\_ Mailing Address \_\_\_\_\_ Date of Auction \_\_\_\_\_

**Fees subject to change without notice**

Transfer fee for current ARHA member-----\$ 20  
Transfer fee for nonmember who wishes to become a 12 month ARHA member-----\$ 50  
Transfer fee for non member who wishes to become an ARHA-Y (youth) member-----\$ 40

**Program Fees:**

High Point+ -----\$75  
Youth High Point -----\$25

**Total amount enclosed** \_\_\_\_\_ (personal check or money order)



**Remit forms to:**

American Roan Horse Association  
6172 South St RD 1 Hamilton, IN 46742  
[www.RideARoan.com](http://www.RideARoan.com) [ARHA@RideARoan.com](mailto:ARHA@RideARoan.com)