



ARHA Duplicate Certificate Request

HORSE INFORMATION

Horse Name : _____ ARHA# _____

Primary Breed Registry: AQHA APHA ApHC other _____ Breed Registration # _____

OWNER INFORMATION

Owner: _____ ARHA# _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

REASON FOR NEEDING A DUPLICATE

Duplicate Certificate Fee: \$20

- A copy of the primary breed registration papers must accompany this form



Remit forms to:

American Roan Horse Association

6172 South St RD 1 Hamilton, IN 46742

www.RideARoan.com ARHA@RideARoan.com