

ARHA Registration Application



Registration Instructions:

- A copy of front and back of primary registration papers must be submitted with this application.
- Photos of both sides, front and rear (no saddle) can be submitted hard copy or email to: ARHA@ridearohan.com . An online registration application is also available.
- Official ARHA registration will be held until receipt of paperwork and payment.

(PRINT CLEARLY)

Owner Information as will be shown on registration certificate

Name (ARHA Membership Required) _____ ARHA # _____

Address _____ City _____ State _____ Zip Code _____

(_____) _____ (_____) _____
 Phone #1 Phone #2 Email

Horse Information according to primary breed registration association

NOTE: If eligibility is questionable, a UC Davis DNA Roan Gene Test will be required.

Name _____ Sex mare stallion gelding

Date of Birth _____ State Foaled _____

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

Sire's Name _____ Breed/Registration# _____ Color _____

Dam's Name _____ Breed/Registration# _____ Color _____

Fee Schedule (subject to change without notice)

Membership

Annual Adult Membership..... \$ 20
 Annual Youth Membership..... \$ 10
 Lifetime Membership..... \$350

Programs

Annual Fast 50+ enrollment.....\$ 75
 Annual High Point+.....\$ 75
 Annual High Point Youth.....\$ 25

Registration (ARHA membership required)

Weanling (foal date through Dec 31st)..... \$ 40
 Yearling.....\$ 45
 Two/Three/Four-year-old.....\$ 50
 Five-year-old and older.....\$ 55
 Horse Name Change.....\$ 50
 Duplicate Certificate.....\$ 20
 Transfer of Ownership..... \$ 10
 Member Name Change..... \$ 5
 Rush Services..... \$100



Registration Checklist

- Pictures of both sides, front & rear (email or hard copy)
- Copy of front & back of primary registration certificate
- Registration application
- ARHA Membership ID or application
- Payment (personal check or money order)

Amount Due

Registration _____
 Membership _____
 Programs _____
 Rush Services _____
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 ARHA@RideARoan.com