

AFFIDAVIT OF CHANGE STATEMENT

****Any change of the pedigree records for any horse recorded at MFTHBA must be accompanied by this affidavit. PLEASE PRINT OR TYPE INFORMATION**

For Office Use Only

CHECK APPROPRIATE TRANSACTION BOX — ORIGINAL PEDIGREE MUST ACCOMPANY THIS AFFIDAVIT

COLOR CHANGE OF HORSE NON-MEMBER FEE: \$50.00 MEMBER FEE: \$10.00

I/We, _____, do hereby request a Color Change to the following horse, _____ Reg.#: _____

Please record the following change in color: _____

If originally registered as a stallion, has horse been gelded? Yes No

Signature Box 1 & 2 (found at bottom of this page) MUST be completed before request can be processed.

MARKINGS CHANGE OF HORSE NON-MEMBER FEE: \$60.00 MEMBER FEE: \$20.00

I/We, _____, do hereby request a Markings Change to the following horse, _____ Reg.#: _____

The marking change is as follows: _____

If originally registered as a stallion, has horse been gelded? Yes No

Signature Box 1 & 2 (found at bottom of this page) MUST be completed before request can be processed.

PEDIGREE CHANGE OF HORSE NON-MEMBER FEE: \$60.00 MEMBER FEE: \$20.00

I/We, _____, do hereby request a change in the Pedigree of the following horse, _____ Reg.#: _____

Reasons for Pedigree change: _____

If originally registered as a stallion, has horse been gelded? Yes No

Signature Box 1 & 2 (found at bottom of this page) MUST be completed before request can be processed.

GENDER CHANGE OF HORSE NON-MEMBER FEE: \$60.00 MEMBER FEE: \$20.00

I/We, _____, do hereby request a Gender Change to the following horse, _____ Reg.#: _____

Please record the following change in gender: From _____ To _____

Signature Box 1 & 2 (found at bottom of this page) MUST be completed before request can be processed.

1 SIGNATURE BOX - PRESENT OWNER OF HORSE: (This box must be completed for all change requests. This box **DOES NOT** require a notarized signature.)

I/We hereby certify that the above information is true and correct to the best of my/our knowledge and that I/we am (are) the owner(s) of record of the above horse at the time of submitting this statement.

Date signed: _____ Owner: _____ Member # _____
Date signed: _____ Owner: _____ Member # _____

Address: _____ City: _____
State: _____ Zip: _____ Day Phone #: _____

2 SIGNATURE BOX - OWNER OF HORSE AT TIME OF BIRTH: (This box must be completed for all change requests. This box **DOES** require a notarized signature.)

I/We hereby certify that the above information is true and correct to the best of my/our knowledge and that I/we was (were) the owner(s) of record of the above horse at the time of birth.

Date signed: _____ Owner: _____ Member # _____
Date signed: _____ Owner: _____ Member # _____

STATE OF: _____, County of: _____ }ss. On this ____ day of _____, 20____

before me personally appeared _____, to me known to be the person described in and who executed the foregoing instrument. IN TESTIMONY WHEREOF I have hereunto set my hand and affixed my official seal, at my office in _____, _____ the day and year first above written. My term as Notary Public will expire: _____

NOTARY PUBLIC