

Canadian Arabian Horse Registry

Phone: 303.696.4500 Email: info@cahr.ca Web: www.cahr.ca Mailing address: CAHR c/o Arabian Horse Association 6030 Greenwood Plaza Blvd Ste 100 Greenwood Village, Colorado, USA • 80111

HORSE AUTHORIZATION

Horse Name:		Registration #	
Recorded Owner(s):		CAHR ID #	-
Address:			
The following person will be auth below, to the Canadian Arabian H		certain documents, specifically designated ted above:	
Name of Authorized Person (prin	at full name):		_
Signature of Authorized Person (in ink):		_
REGISTRATION APPLICATI			
Check Box	rom: (MM/DD/YY)	To: (MM/DD/YY)	
breeding or insemination For stallions, this person c transported or stored semen	an sign for the owner of the sta plication does not change the r	at the time of foaling and for the owner of the allion at the time of breeding for all breeding mecorded owner or breeder of the foal.	
Check Box	rom: (MM/DD/YY)	To: (MM/DD/YY)	
 This person is authorized t This person may sign Tran If this authorization is revo Certificates that are issued a be prior to the date the revo 	to request Transported/Stored Sasported/Stored Semen Service bked, the signature of this personater the "From" date shown about the cation notice is mailed to the Communication of the Communication		Semen Service
I (we) further agree this authorization of change or revocation is	ntion will become effective upon received by the CAHR. As the	on receipt by the CAHR and will remain effective recorded owner(s), I (we) acknowledge and age the person specified above will be effective or	gere with the
OWNER SIGNATURE:		OWNER SIGNATURE:	
DATE SIGNED:		DATE SIGNED:	