

# Breeding Lease Authorization



## American Paint Horse Association

P.O. Box 961023 • Fort Worth, Texas 76161-0023  
(817) 834-APHA (2742) • Fax: (817) 834-3152  
apha.com • askapha@apha.com

### Leasing Your Horse

- Alterations or added conditions may make this form unacceptable, and verification may be required.
- If the Lessee is a ranch, partnership or corporation, a signature authorization must be placed on file with APHA before this lease can be recorded. Forms are available from the APHA office or online at [apha.com/forms](http://apha.com/forms).
- If this lease is to be terminated prior to the ending date listed, written notification must be received by APHA giving new termination date and signed by both lessor and lessee.
- No transfer may be completed until this lease is expired or terminated.
- Lessee will receive a certificate from APHA as validation upon completion of lease authorization.
- This lease form is not recognized for showing purposes. Please contact the Performance Department at 817-222-8455 for more information about show leases.

Registered Name of Horse: \_\_\_\_\_

Registration Number: \_\_\_\_\_

The Lessee is authorized to sign all documents pertaining to this horse under the rules of the American Paint Horse Association during this period. At the expiration of this lease, the lessor's authority will be terminated.

Beginning Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Ending Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Month Day Year Month Day Year

#### Leased From (Owner of Record)

Name: \_\_\_\_\_

APHA ID Number: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Signature: **X** \_\_\_\_\_

#### Leased To (Lessee)

Name: \_\_\_\_\_

APHA ID Number: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Signature: **X** \_\_\_\_\_

### Membership

- To take advantage of member rates, the lessee must have a current membership in the same name listed on the form. Memberships will be issued in the ownership listed on this form. Memberships begin the same month transfer is postmarked.
- For more information, please call MemberCare at 817-222-6423 or email [askapha@apha.com](mailto:askapha@apha.com).
- Average lease completion times range from two to four weeks, depending on the time of year submitted. The following is required on rush work:
  1. Outside of envelope marked "RUSH"
  2. Daytime phone number
  3. Certified funds or a credit card payment
- The rush fee will not be refunded.
- An office processing fee of \$25 will be charged on all registration work that is not processed to completion.
- Fees subject to change without notice.

Fees	(U.S. Funds)	Member
<input type="checkbox"/> Lease Filing Fee		\$25
<input type="checkbox"/> Rush Fee (additional)		\$25

#### Membership Levels

##### Adult

- One-year—\$45     Three-year—\$105  
 Five-year—\$175     Lifetime—\$750

##### Junior

- One-year—\$25     Three-year—\$55  
 J-Term—\$125

#### Additional Product Packages:

- Premium**—\$45 (save \$20) One year subscription to the *Paint Horse Journal* (\$30 value), four generation, frameable, pedigree certificate(\$20 value), \$15 gift certificate to the APHA General Store.
- Deluxe**—\$15 (save \$5) Four generation frameable, pedigree certificate (\$20 value)

#### Total Amount Due

Lease Fee: \$ \_\_\_\_\_  
Rush Fee: \$ \_\_\_\_\_  
Membership Dues: \$ \_\_\_\_\_  
Product Packaging: \$ \_\_\_\_\_  
**TOTAL: \$ \_\_\_\_\_**

Check or money order enclosed. **Do not send cash.**

**Check Processing Policy:** In the event that your check is returned unpaid for insufficient or uncollected funds, we may present your check electronically.

MasterCard     Visa     American Express

If paying by credit card, please complete the following.

Card No.: \_\_\_\_\_

Exp. Date: \_\_\_\_\_ CVV#: \_\_\_\_\_

Name of Cardholder: \_\_\_\_\_

APHA ID No.: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Daytime phone: \_\_\_\_\_

Signature: **X** \_\_\_\_\_