# Application for International Appendix Registration

1. My horse is registered with:

American F 122 E. Exchange Ave

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E	Enclose an A		420 . East	Wanth Tamas	76161

122 E. Exchange Ave., Suite 420 • Fort Worth, Texas 76164 *apha.com* 

the QR code to learn more			
Paint Horse Association of Australia (PHAA)			

\_\_\_\_ Sire's Registration Number: \_\_\_\_

\_\_\_\_ Dam's Registration Number: \_\_\_\_

\_\_\_\_ Postal Code:\_\_\_\_\_

Select APHA services are available

- International Appendix registration is designed for horses intended for breeding and/or showing purposes with APHA. This process is used when a horse is already registered with a recognized international affiliate (see list at right) OR for horses residing outside of North America and Europe who have at least one APHA-registered parent.
- International Appendix horses can exhibit in APHA-approved shows or events in their respective division (Regular Registry or Solid Paint-bred). These horses are not allowed to participate in APHA shows or events in the U.S., Canada or Europe (Zone 12).
- See the APHA Rule Book (RG-020.D) for full details regarding International Appendix Registration.

### How to Apply

- Fill out this application.
- Provide a copy of your horse's registration certificate from a recognized affiliate studbook.
- Make sure the pedigree includes at least 4 generations—the pedigree must come from an official international registry. It must include all applicable American registration names, registration numbers, and color/pattern type (if applicable).
- Provide current photographs of the horse being registered, showing the entire animal (left side, right side, front and rear). If the horse has minimal markings, include additional photos of those white markings with and without a ruler.
- Provide payment for all fees.
- Parentage verification is required on all horses registered with APHA as of January 1, 2022. If parentage verification has already been done by an approved partner registry, APHA will accept those results.

#### Membership

- An APHA membership is required. You may purchase it at this time.
- Memberships are issued in the exact same name as the name under which the horse is owned. Memberships begin the same month the registration application is postmarked.

#### **Rush Fees**

- •Work is done in the order it is received unless the rush fee is paid. The following is required for rush service:
- 1. Envelope marked "RUSH"
- 2. Email address
- 3. Payment for the rush fee (non-refundable)
- Minimum processing time for a rush registration is 10 business days from date received.
- All fees are subject to change without notice.
- All fees required to complete the work will be charged.

## Associacão Brasileira De Criadores De Cavalo Paint (ABC Paint) Paint Horse Association of New Zealand, Inc. (PHANZ) ACRICAMDE (Costa Rica) Not registered with the above organizations, but has at least one APHA-registered parent

\_\_\_\_\_ State/Province:\_\_\_\_

\_\_\_\_\_ State/Province: \_\_\_

Postal Code:

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

2. International Registered Name of Horse: \_\_\_\_

3. International Registered Identification Number: \_\_\_\_

4.	Sire's	Name:	

5. Dam's Name: \_

6. Current Recorded Owner's Name: \_\_\_\_

- 7. Owner's APHA I.D. No.:\_\_\_\_\_
- 8. Owner's Address:\_\_\_\_\_
- 9. City: \_\_

10. Country: \_\_\_\_

- 11. Fax: \_\_\_\_\_
  - 12. Email: \_\_\_\_\_ 13. Recorded Breeder's Name: \_\_

14. Recorded Breeder's Address:\_\_\_\_

15. City: \_\_\_\_\_

16. Country: \_\_\_

Fees	Member
Appendix Registration Fee	\$49
Rush Service	\$59
DNA kit for parentage verification	\$79

#### Adult\* Membership

One-year – \$89\*\* Three-year – \$199\*\*

Five-year – \$319\*\* \*Adult memberships now include a Paint Horse Journal

subscription. Lifetime members will receive a 7-year subscription.

#### Junior Membership

Junior One-year – \$39 (Age 18 or younger) Birth date: \_\_\_\_\_

\*\*Discounted fees for select services when submitted online. Click or scan the QR code at the top for details.

MasterCard	VISA	American Express				
Please complete the following credit card information:						
Card No.:						
Exp. Date:		CVV#:				
Name of Cardholder:						
APHA I.D. No.:						
Address:						
City:						
Country:						
Postal Code:						
Daytime Phone:						

Payment must accompany any work submitted to APHA. By providing payment details, I am authorizing all charges necessary to complete this work.

