

GELDING OR SPAYED MARE REPORT

2720 W. Pullman Road. Moscow, ID 83843 ♦ (208) 882-5578 ♦ www.appaloosa.com ♦ registration@appaloosa.com

To report a horse which is now a gelding or spayed mare, please MAIL the following to the ApHC office:

1. The original Certificate of Registration--The Certificate will be stamped "Gelded" or "Spayed" and returned to the recorded owner. There is no charge for this procedure.

If a new certificate is requested, please MAIL the following to the ApHC office:

1. A corrected certificate fee of \$50

2. Four current (taken in the past 6 months) colored photographs including both sides, a direct face and a rear view-clearly showing all face and leg markings.

Photographs must be on photo quality paper and not larger than 4x6 inches (10.2 cm x 15.2 cm). The ApHC reserves the right, at its discretion, to require additional photographs of better quality.

AS THE CERTIFICATE OF REGISTRATION IS MAILED IN EACH CASE, WE STRONGLY SUGGEST THEY BE SHIPPED IN A TRACKABLE MANNER.

Horse's Name:		Registration #:	Color:	
Date Gelded or Spayed: MoDay	Year			
Signature of Recorded Owner or Authorized	ed Agent: X			
Printed Name of Owner:				
Mailing Address:		City:		
State/Province:	Co	untry:	Zip/Postal Code:	
Day Phone: ()		Evening Phone: ()		
E-mail Address:				
	PI	DES		
Fees subject to change Make checks or money orders p			uk. If you wish to pay by credit card, please provide credit	
card information below. Applications received without re				
** Unless otherwise indicated, the fees below re December 31st. If, for any reason, you are not with current member fees and an additional \$1	an ApHC member and do no	ot wish to become an ApHC	n a current year ApHC membership ending on ¹ member, please submit your request in writing, along	
Corrected certificate fee (no charge for	stamping papers)		\$50 **	
OPTIONAL RETURN SHIPPING FEE (US	residents only)			
□ US Postal Express Mail □ UPS Next Day			Contact ApHC office for Prevailing Rates	
I. CREDIT CARD CHARGES: Starting.	Ianuary 1. 2019 Appaloosa I		-	
Applications received without required payment v	vill be assessed an Invoicing	Fee		
		DUCOVER		
Credit Card Number:	NUMBERS)	Expiration Date	CVV #:	
Signature of Cardholder: X	·			
Printed Name of Cardholder:				
Mailing Address:		City:		
State/Province:	Country:	Zip/Postal Code:		
Day Phone: ()	Evening Phone: ()		
E-mail Address:				
CHECKLIST - DID YOU REMEMBE	R:			
Complete application		Original Certification	Original Certificate of Registration	
□ Four current color photographs if having new Certificate made (Photographs must be on photo guality paper and not larger than 4x6 inches-10.2 cm x 15.2 cm)		Geres Fees	Gees Fees	