

## 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

☐ Complete application

☐ Four current color photographs if having new Certificate made

(Photographs must be on photo quality paper and not larger than 4x6 inches-10.2 cm x 15.2 cm)

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.

TRACKABLE MANNER.	EACH CASE, WE STRUNGLY S	SUGGEST THEY BE SHIPPED IN A	
Horse's Name:	Registration #:	Color:	
Date Gelded or Spayed: MoDay Year			
Signature of Recorded Owner or Authorized Agent: X			
Printed Name of Owner:			
Mailing Address:	City:	City:	
State/Province:	Country:	Zip/Postal Code:	
Day Phone: (	Evening Phone: ()		
E-mail Address:			
	FEES		
Fees subject to change Make checks or money orders payable to Appaloosa Hors card information below. Applications received without required payment will be a	se Club, U.S. funds, drawn on U.S. bank. If		
** Unless otherwise indicated, the fees below reflect ApHC Member ApHC December 31st. If, for any reason, you are not an ApHC member and with current member fees and an additional \$100.00 non-member sur	d do not wish to become an ApHC mem		
☐ 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 January 1, 2019 Appal Applications received without required payment will be assessed an Invo	picing Fee.	it card surcharge.	
	Expiration Date:	CVV #:	
Signature of Cardholder: X			
Printed Name of Cardholder:			
Mailing Address:	City:		
State/Province: Country:	Zip/Postal Code:		
Day Phone: () Evening Phone	ne: (		
E-mail Address:			
CHECKLIST DID VOU DEMEMBED.			

☐ Original Certificate of Registration

☐ Fees