



APPLICATION FOR CERTIFICATE OF ELIGIBILITY TO SHOW

U.S. Equestrian Federation and the Registry of the American Saddlebred Horse and Breeders Association (ASHBA) require that all horses be entered and shown under their registered names and in the names of their recorded owners. However, a Certificate of Eligibility to Show may be issued to a person other than the recorded owner under the following circumstances:

1. The recorded owner of a horse may execute a Certificate of Eligibility to Show application indicating a recorded owner's permission for an identified horse to be shown under the name of the person so designated.
2. The recorded owner may execute a Certificate of Eligibility to Show application whenever the official Certificate of Registration has not yet been turned over to the purchaser; however, the execution of the Certificate is not limited to this circumstance.
3. The Registry of the ASHBA may execute a Certificate of Eligibility to Show in the name of a current unrecorded owner if, after reasonable investigation and approval by the ASHBA Registry Rules Committee, the Registry of the ASHBA is satisfied that it is not possible to document and record the complete chain of ownership and properly record the name of the current owner. In this case four current color photographs of the horse are required; identification by DNA testing may also be required at the Registry of the ASHBA discretion. Certificates of Eligibility to Show approved by the ASHBA Registry Rules Committee are not subject to annual renewal as indicated under 5. below. If the horse in question is sold, the buyer may apply for a new Certificate of Eligibility to Show in his/her name. This would also be subject to approval by the ASHBA Registry Rules Committee.
4. A Certificate of Eligibility to Show application must be filed with the Registry of the ASHBA with applicable fees prior to the time the horse is shown. The Certificate of Eligibility to Show will be returned to the grantee with the office ASHBA seal affixed as endorsement that eligibility has been granted and has been recorded with the Registry of the ASHBA. A copy of this Certificate and a copy of the horse's registration certificate should be included with horse show entries in order to comply with current Registry of the ASHBA Rules and U.S. Equestrian Federation rules.
5. The Certificate may be terminated by the recorded owner at any time by notifying the ASHBA office and the person designated on the Certificate, in writing, stating that the Certificate is void as of a specified future date. Otherwise, Certificates of Eligibility to Show expire on November 30th, the last day of the U.S. Equestrian Federation competition year, and a new application form and fee must be submitted to the Registry of the ASHBA to be effective for the next U.S. Equestrian Federation competition year.

I _____ the recorded owner of _____
Name of Owner Name of Horse
 registration number _____, a _____, foaled in _____
Color Sex Year
 do hereby grant permission to _____
Name of Person
 Address _____
 City _____ State _____ Zip Code _____
 to show said horse under his or her name from ____/____/____ through ____/____/____, or until the end of the
MM/DD/YYYY MM/DD/YYYY
 U.S. Equestrian Federation competition year.

ASHBA Futurities and Sweepstakes prize money to be distributed to (check one):

Recorded Owner Certificate of Eligibility to Show Recipient

The undersigned recorded owner and recipient of this application agree to comply with all, Registry of the ASHBA and USEF rules and regulations.

Signature of Person Granted this Application _____ Date _____
 Signature of Recorded Owner _____ Date _____
 Address _____
 City _____ State _____ Zip Code _____ Phone _____

1. Please return completed form with correct fee to the ASHBA office.
 Approved _____ Denied _____
2. To do business with the Registry of the ASHBA you must be a current competing member in good standing of ASHBA or pay a \$50 non-member fee.
3. FEE: \$50.00, payable to ASHBA, 4083 Iron Works Parkway, Lexington, KY 40511; phone 859/259-2742 or fax 859/259-1628.
4. Please check for priority processing _____. Note a \$100 fee will be assessed for priority processing.

Method of Payment:

* 3% Processing fee will be added to all ASHBA credit/debit card transactions. Total Due: \$ _____

Check (payable to ASHBA) **OR** Visa, MasterCard, Discover, AMEX

Credit/Debit Card #: _____ CCV Code: _____ Exp. Date ____/____/____

Cardholder's Name: _____

Return completed form by email to saddlebred@asha.net, fax or mail to:
 ASHBA
 4083 Iron Works Parkway
 Lexington, KY 40511