

# APPLICATION FOR RETAINED SEMEN RIGHTS PERMITS

FOR OVERNIGHT DELIVERY TO AQHA: 1600 QUARTER HORSE DR, AMARILLO, TX 79104 • MAILING ADDRESS: P.O. BOX 200, AMARILLO, TX 79168  
WWW.AQHA.COM • © 806-376-4811 • FAX: 806-349-6405

I hereby acknowledge that I have read and agree to be bound by and follow the AQHA rules pertaining to frozen semen. I also understand that AQHA will investigate non-compliance with these rules, and in the event of such non-compliance, any resulting foals may be ineligible for registration.

I understand that one Retained Semen Rights Permit is required to register a foal conceived using frozen semen from this stallion after he is no longer in my ownership. Once issued, the signed permit will serve as the stallion owner's portion of the breeder's certificate.

As the stallion owner, I understand that if the stallion was foaled on or after 1/1/2015, his stored semen cannot be used beyond two (2) years after death or being gelded. Furthermore, I must ensure that a sufficient number of Retained Semen Rights Permits are purchased prior to my sale of the stallion. Once the ownership changes, I understand that I may no longer purchase Retained Semen Rights Permits from AQHA.

Stallion's Name

Registration Number

Please mail the Retained Semen Rights Permits to:

Name

AQHA ID Number

Address

City, state and zip code

Telephone Number

Signature of owner or authorized agent

AQHA ID Number

Date Signed

Number of permits requested: \_\_\_\_\_ X \$75 = \_\_\_\_\_  
Total Enclosed

For complete rules regarding the use of this permit, please refer to AQHA's Handbook of Rules & Regulations available at [www.aqha.com](http://www.aqha.com) or by calling Member Experience at (806) 376-4811.

## FEES SUBJECT TO CHANGE WITHOUT NOTICE.

<input type="checkbox"/> CHECK <input type="checkbox"/> MONEY ORDER		<b>IF PAYING BY CREDIT CARD, PLEASE COMPLETE THE FOLLOWING:</b>	
<input type="checkbox"/> VISA <input type="checkbox"/> MASTERCARD <input type="checkbox"/> AMEX <input type="checkbox"/> DISCOVER			
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CARD NUMBER			
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EXP. DATE (MMYY)		DAYTIME PHONE	
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CARDHOLDER NAME			
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CARDHOLDER SIGNATURE		BILLING ZIP CODE	
Please be advised all payments will be assessed a nonrefundable transaction fee of 2.5%, effective May 1, 2022. AQHA reserves the right to waive the fee, if payment is submitted by check or money order.			
CREDIT CARD WILL BE BILLED FULL BALANCE OF SELECTED AND APPLICABLE FEES.			
<b>DO NOT SEND CASH • U.S. FUNDS ONLY</b>			