



AUTHORIZATION TO ACT AS AGENT

I, _____, the recorded owner of the
Horse _____, of NAPHA # _____
do hereby declare that I designate _____
of _____

to act as my agent with regard to registration and showing matters of NAPHA. This
authorization is to take effect this _____ day of _____, Year _____
and continue until _____ day of _____, Year _____

My Agent has authority to act on my behalf in the following matters: (please initial)

- ____ Signing of entry forms for shows.
- ____ Horse to be shown under Agent's name.
- ____ Horse to be shown under Recorded Owner's name.
- ____ Signing of Breeder's Certificates
- ____ Signing of Service Certificates
- ____ Signing and filing of Stallion Reports
- ____ Signing of applications for registration.
- ____ Signing of transfer of ownership on horses registered in my name.
- ____ Other: _____

SIGNED:

Owner's Signature

MEMBER#

Address _____

Phone _____ Email _____

Date _____

Agent's Signature

NAPHA

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