



ROCKY MOUNTAIN HORSE® ASSOCIATION

Request for Duplicate Certificate of Registration

I/We, as owner(s) of the Rocky Mountain Horse identified below, do hereby request a Duplicate Certificate of Registration. Information follows:

NAME OF HORSE: _____ RMHA#: _____

REASON FOR REQUEST: _____

I/We understand that if the original Certificate of Registration is recovered, I/we will keep the Certificate of Registration that is in the best condition and return the other certificate to the RMHA Registrar:

OWNER SIGNATURE: _____

RMHA #: _____ DATE: _____

CO-OWNER (if applicable): _____

ADDRESS: _____

PHONE: _____ CELL: _____

Make check payable to "RMHA"	Mail to: RMHA Headquarters 4037 Iron Works Pkwy, Ste 160 Lexington KY 40511-8508
Check #: _____ Total Enclosed: _____	
VISA/MC #: _____ Expires: _____ 3 Digit Code: _____	
Signature: _____	

Office Use Only

Received by RMHA: _____	Date: _____
Executive Board Approval: _____	Date: _____
New Certificate Issued: _____	Date: _____