



AUTHORIZATION FORM FOR BUSINESS ENTITIES

PO Box 200, Amarillo, Texas 79168 • 806-376-4811 • www.aqha.com

This form is to be used for partnerships, corporations, limited liability companies, etc. which have been legalized with the state to perform business operations. Proceed carefully when choosing the documents for the individual to sign.

INSTRUCTIONS

- Complete the required fields (*) below. List the information for the account requesting authorization in the customer details section.
- The authorization will begin on the date received by AQHA.
- Record the name, title, and signature of each individual in the authorized person(s) section. The title can be, but is not limited to, owner, partner, president, vice president, secretary, agent, etc.
- It is important to note, if you fail to select a limitation, we will assume ALL services are to be included for authorization.
- Partners, corporate officers, and/or co-managers that will **not** sign documents should be listed on the back of this form.
- Subsequent authorization forms will supersede all previous forms.
- If an authorized individual is no longer living, contact AQHA for information regarding required estate documentation.
- To remove an agent from the list of authorized signers, the owner must submit a signed statement.
- To remove an existing owner or partner, the owner or partner being removed must submit a signed statement acknowledging the request.

CUSTOMER DETAILS

NAME OF THE BUSINESS ENTITY*

AQHA MEMBERSHIP ID

ADDRESS*

CITY, STATE*

COUNTRY*

ZIP CODE*

PHONE NUMBER

EMAIL ADDRESS

AUTHORIZED PERSON(S)

PRINTED NAME AND TITLE OF THE AUTHORIZED INDIVIDUAL*	SIGNATURE OF AUTHORIZED INDIVIDUAL*	ALL DOCUMENTS	OWNERSHIP TRANSFERS	BREEDING REPORTS AND PERMITS	REGISTRATION APPLICATIONS	GENETIC TESTING	BREEDERS CERTIFICATES	DUPLICATES AND CORRECTIONS	LEASES
1.	X								
2.	X								
3.	X								
4.	X								
5.	X								

Is the above person's authorization limited to one horse? ☐ YES ☐ NO If yes, please specify which horse: _____

In executing this authorization form, I represent it is true and correct and I certify that I have the authority to act on behalf of the party listed at the top of this page.

The undersigned agrees to indemnify and hold harmless the American Quarter Horse Association from any and all liability, whenever or however arising, by virtue of it accepting documents signed as indicated above, agreeing to defend AQHA at the undersigned's expense, if it is sued in a court of law; and if judgement be taken against AQHA, to pay said judgement when requested and obtain written release in form acceptable to AQHA, which indemnity is in Amarillo, Potter County, Texas, or wherever AQHA is sued in court.

SIGNATURE AND TITLE*

PRINTED NAME

DATE SIGNED

PARTNERS/OFFICERS/MANAGERS

Persons listed in this section are represented as being all partners, owners, officers, or managers of the business entity.
These will not be authorized to sign any documents unless also listed in the Authorized Person(s) section.

PRINTED NAME <u>AND</u> TITLE*	ADDRESS*
1.	
2.	
3.	
4.	
5.	