

Street Address: ____

City/State/Zip + 4: ___

American Morgan Horse Association, Inc. 4037 Iron Works Parkway, Suite 130, Lexington, KY 40511-8508 (802) 985-4944 • Fax: (859) 287-3555 Registry@morganhorse.com www.morganhorse.com

REQUEST TO CONVERT FROZEN SERUM TO DNA

FOR OFFICE USE ONLY: MH

To be eligible for conversion VGL must have a serum sample on file. Samples have been saved since 12/8/1988 starting with MH #8664.

Conversion fee: \$100 If the sample on file with VGL is not viable, the conversion fee will be applied to the new blood typing and DNA fee of \$300. Horse Name: _______ Registration Number: ______ Owner Name: ______ Phone Number: _____

By submitting this application and accepting the benefits of transacting business with the AMHA Registry, I hereby subject myself to all the provisions of the By-Laws, Rules and Regulations of the American Morgan Horse Association, Inc., as they now exist or may, from time to time, be amended, knowledge of which I now have or will immediately acquire. Specifically, I agree to be bound by the Rules and Regulations of the Registry and AMHA's Rules for Hearings and Appeals which are available from the Registry or at www.morganhorse.com.

I hearby certify the above information is correct to the best of my knowledge and belief, and recognize that I may be subject to sanctions if I violate the Registry's Rules and Regulations or impair the reliability of the records of the AMHA.

Signature:		Date:	
	Recorded owner /lessee		

Fees MUST accompany all applications.

☐ Check payable to AMHA for these transactions enclosed.

Please bill my:	□ VISA	☐ MASTERCARD	□ DISCOVER	☐ AMERICAN EXPRESS		
Card Number: _						
Expiration Date	:		CVV:		Amount: \$	

If this transaction is not completed within 120 days, the work will be retured and a cancellation fee will be assessed. Current eligibility and Registry fees will apply upon resubmission.

Authorized Signature: ____