



American Morgan Horse Association, Inc.
4066 Shelburne Road, Suite 5 • Shelburne, VT 05482-4904
Telephone: (802) 985-4944 • Fax: (802) 985-8897
E-mail: registry@morganhorse.com
Website: www.morganhorse.com

DNA KIT REQUEST

WHO MUST BE DNA TYPED:

- Every horse for which application for registration is made after December 31, 1991.
- All mares that produce a foal.
- All stallions that sire a foal.

INSTRUCTIONS:

1. Print in ink or type only.
2. Registration application must be submitted with this application if the horse being DNA typed is not registered.

REASON FOR DNA TESTING:

- To establish a DNA type To confirm identity

I request the DNA for the following horse be determined and placed on record with the American Morgan Horse Association.

Horse Name: _____

Registration Number: _____ Date of Birth: _____

Dam's Name: _____ Registration Number: _____

Sire's Name: _____ Registration Number: _____

Name and address that kit should be sent to:

Name and address where the horse is stabled if different than your address:

Telephone Number: _____

E-mail the DNA Kit to the following e-mail address (print clearly): _____

Horse's Registered Name: _____

Registration Number: _____

DNA KIT REQUEST

I understand that the appropriate kit and instructions will be sent directly to the address designated. DNA reports are the exclusive property of the American Morgan Horse Association.

The American Morgan Horse Association (AMHA) exists to preserve, promote, and perpetuate the Morgan horse. "The American Morgan Horse Association recommends and expects that all persons will conduct themselves in an honest, forthright, ethical, and sportsmanlike manner in their relationships with each other at any time they are involved in Morgan horse-related matters." In making this application I hereby subject myself to all the provisions of the Constitution, 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.

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.

Signature of Owner(s) or Lessee(s) or authorized agent

AMHA Account Number

DNA Typing Fee: \$50/horse

Rush Service is available for \$100/horse. The kit will be mailed the next working day after receipt of the application, via Priority mail.

**~ Fees MUST accompany all applications ~
Make all checks payable to:
The American Morgan Horse Association, Inc.**

Check payable to AMHA for these transactions enclosed.

Please bill my: VISA MASTERCARD DISCOVER AMERICAN EXPRESS

Card Number: _____

Expiration Date: _____ CVV: _____ Amount: \$ _____

Authorized Signature: _____