

Request for Embryo/Oocyte Transfer Permit



ARABIAN HORSE ASSOCIATION
 Mail to: PO Box 173886
 Denver, CO 80217-3886
 Phone: 303-696-4500
 ArabianHorses.org

For FedEx & UPS:
 10805 E Bethany Dr
 Aurora, CO 80014
 Fax: 303-696-4599
 info@ArabianHorses.org

I hereby acknowledge that I have read and agree to be bound by and follow the Arabian Horse Association's Rules and Regulations pertaining to embryo/oocyte transfer. I also understand that AHA will investigate non-compliance with these Rules and Regulations and, in the event of such non-compliance, any resultant foals may be ineligible for registration and penalties provided under Article 137 of AHA's Rules and Regulations may be imposed.

I understand that the DNA type of the donor mare must be on permanent record with AHA before the permit will be issued. I am aware that collection and implantation of an embryo/oocyte prior to the issuance of a permit will result in an assessment of the Late Permit Fee of \$250. I may also be charged for any additional costs that are incurred by AHA investigating the accuracy of the embryo/oocyte transfer.

I have enclosed the \$100.00 Permit Fee and hereby request an Embryo/Oocyte Transfer permit for the mare listed below:

<input type="text"/>	<input type="text"/>
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Donor Mare

Registration #

<input type="text"/>	<input type="text"/>
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Owner #

Email

<input type="text"/>	<input type="text"/>
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Signature of Recorded Owner (or Authorized Agent)

Month Day Year

Embryo/Oocyte Transfer Permit Fee	\$100.00	\$	<input type="text"/>
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DNA type Testing Fee for Donor Mare	\$65.00	\$	<input type="text"/>
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TOTAL AMOUNT ENCLOSED:	\$	<input type="text"/>
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Please ship DNA Hair Sample Kit to the address below:

Name	Home Phone: ()	Day Phone: ()	
Address			
City	State	Zip	



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