TEXAS ARABIAN BREEDERS **ASSOCIATION**

P.O. Box 260 **Aubrey, TX 76227** Phone: (214) 679-2026 mandolynn44@gmail.com www.texasarabianracing.com

TRANSFER OF ACCREDITATION REPORT PLEASE PRINT OR TO							
1.	HORSE INFORMATION						
	NAME OF HORSE			AHA OR CAHA#			
	FOALING DATE	COLOR		SE	l		
	SIRE						
	DAM DAM						
2.	CURRENT OWNERSHIP INFORMATION						
	NAME PHONE#						
	STREET ADDRESS						
	CITY	STATE		ZIP			
3. PREVIOUS OWNERSHIP INFORMATION							
U.	NAME OF PREVIOUS OWNER (AS APPEARS ON AHA OR CAHA REGISTRATION) PREVIOUS OWNER PHONE#						
I certify the above information is correct and that I, the undersigned, have full authority to execute and file this report. I understand and will abide by the rules and regulations of the Accredited Texas Bred program.							
	Signature				Owner	Agent	
	Print Name				_	_ 0	
	TRANSFER REPORT WILL NOT BE PROCESSED WITHOUT				S FORM WITH	YOUR	
	THESE ITEMS:				CHECK PAYABLE TO: TABA		
	 Copy of Registration Papers (front and back) Transfer Fee: Member \$25° NonMember \$50° 			P.O. Box 215 Forney, TX 75126			
	FOR OFFICE USE ONLY: Date Recd Fee Paid:			TARA Member #			
Accreditation #:Date Confirmed:Certificate Sent:							
Pending:							