

TRANSFER OF FROZEN SEMEN

FROZEN SEMEN TRANSFER REQUIREMENTS	Transfer Fee\$65 🗆
The Owner/Seller OR the BUYER must be an active ASHA member or a \$50 non-member transaction fee must be paid.	Membership Dues (Please make checks for
	Membership fee or Breed promotion to ASHA. Please
Please print name of member or applicant	make check for all other fees to ASR. Membership year
Current ASHA Member New ASHA Member ASHA Renewal Non-member	Dec. 1 - Nov. 30)
Check Enclosed Credit Card CCV Code	Senior - Competing\$70 🔲
Card Number	Senior - Non - Competing \$40 \square
Signature Print Name	Non-member transaction fee\$50 🔲
If check, please make check for membership fee to ASHA and all other fees to ASR.	Total Fees Due\$
The buyer will have authority to sign breeder's certificates and stallion service reports for foals conceived by the use of this frozen semen.	
This is an OFFICIAL DOCUMENT and must be COMPLETED IN FULL BEYOND THIS POINT.	
REGISTERED NAME OF HORSE:	REGISTRATION NUMBER:
Date Of Sale/(indicate date frozen semen actually changed ownership)	
Number Of Breeding Doses Purchased	
BUYER'S NAME:	For Office Use Only Owner's ASHA ID# Authority ID#
ADDRESS:	
CITY/STATE/ZIP:	
PHONE: EMAIL:	
If the Buyer's information reflects the name(s) of a business entity (farm, partnership, Inc., LLC, Trust, etc.), a Statement of Signature Authority form must be filed (or currently be on file) with the Registry.	
If the written BUYER'S INFORMATION lists the names of MORE THAN ONE person or party, ONE of these JOINT OWNERSHIP selections MUST BE indicated above.	
SELLER'S NAME:	
ADDRESS:	For Office Use Only
	Owner's ASHA ID# Authority ID#
CITY/STATE/ZIP:	
PHONE: EMAIL:	
If the seller is not the recorded owner of the stallion at the time the semen was sold, a contract of sale or statement of the parties must be filed with the Registry verifying that the seller owns the semen. See Registry Rule Section V.C. regarding frozen semen.	
SIGNATURE(S) of SELLER(S) SIGNATURE(S) of SELLER(S)
RECORDED OWNER OR FROZEN SEMEN OWNER	
PRINT NAME PRINT NAME	≣

To PROCESS, mail to ASR at 4083 Iron Works Parkway Lexington, KY 40511