



# NOTICE OF LEASE AGREEMENT

For a lease of a horse to be recognized by the Registry of the American Saddlebred Horse and Breeders Association (ASHBA), written notice of its existence must be filed with the Registry in a timely manner, signed by both lessor and lessee, with all applicable fees. The notice must provide the effective date of lease and may provide a termination date. Otherwise, it may be terminated by written notice, giving termination date, signed by both lessor and lessee.

1. Checking the box marked "Breeding" in the Purpose of Notice section below, authorizes lessee to execute all documents pertaining to the recognized activities of breeding, regardless of any limitation in the actual lease agreement. **Enforcement against the lessee of limitation on use of the horse is solely the responsibility of the lessor.**
2. A current ASHBA competing member may transact business with the Registry of the ASHBA. A non-member of the may transact business with the Registry of the ASHBA upon payment of a \$50 non-member transaction fee per transaction.

***This is not a contract. This is a reporting of information only.***

**Print in ink or type only**

The registered American Saddlebred horse named \_\_\_\_\_  
 Registration # \_\_\_\_\_, a    Mare    Stallion    Gelding, has been leased to:  
 Lessee Name \_\_\_\_\_ ASHBA Member # \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ Email \_\_\_\_\_

**IMPORTANT:**

Exact beginning date \_\_\_\_/\_\_\_\_/\_\_\_\_ until further notice unless ending date is provided here \_\_\_\_/\_\_\_\_/\_\_\_\_.

Check here if this is a breeding lease.

***If lease is for showing purposes only, a Certificate of Eligibility To Show Form must be completed instead.***

Lessor/Owner \_\_\_\_\_ ASHBA Member # \_\_\_\_\_  
 Address \_\_\_\_\_  
 City/State/Zip \_\_\_\_\_  
 Phone \_\_\_\_\_ Email \_\_\_\_\_

**SIGNATURES:**

Lessee(s) or Authorized Agent \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Print Name \_\_\_\_\_  
 Lessee(s) or Authorized Agent \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Print Name \_\_\_\_\_  
 Lessor or Authorized Agent \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_  
 Print Name \_\_\_\_\_

**Fee for Lease Agreement: \$50.00** (3% processing fee added to all ASHBA credit/debit card transactions)  
**Method of Payment:**  
 \_\_\_\_\_ Check (payable to ASHBA) **OR** Visa, MasterCard, Discover, AMEX **Total Due: \$** \_\_\_\_\_  
 Credit/Debit Card #: \_\_\_\_\_ Exp. Date \_\_\_\_/\_\_\_\_/\_\_\_\_ (month/year)  
 Cardholder's Name: \_\_\_\_\_

Return completed form by email to [saddlebred@asha.net](mailto:saddlebred@asha.net), fax or mail to:  
 ASHBA, 4083 Iron Works Parkway, Lexington, KY 40511