



ARHPA Horse Id Application

RD101 Eligibility

1. Roadster Horses: In order to compete all horses must be a Standardbred or Standardbred type. Roadster Ponies are not permitted to compete in Roadster Horse classes.

a. All horses competing in Federation licensed competitions must be properly identified and must obtain a Roadster Horse Identification number from the American Road Horse and Pony Association (ARHPA). An ARHPA Roadster Horse ID number for each horse must be entered on all entry forms for licensed competitions.

b. Only one unique ARHPA Roadster Horse ID Number will be issued per horse. This unique ID number must subsequently remain with the horse throughout its career. Anyone knowingly applying for a duplicate ID Number for an individual horse may be subject to disciplinary action.

c. The Federation and/or ARHPA as applicable must be notified of any change of ownership and/or competition name of the horse. Owners are requested to notify the Federation and/or ARHPA as applicable of corrections to previously submitted information, e.g., names, addresses, breed registration, pedigree, or markings.

Please Fill Out the Below Information: (if the horse has papers send with this form to address below)

1) HORSE INFORMATION (please print)

Show Name of Horse: _____

Breed or combination of Breeds: _____

Foal Date: _____ Height: _____

Sex: Stallion Mare Gelding

| | | | | | |
|--------|-------|----------|-----------|----------|--------|
| Color: | Bay | Chestnut | Grey | Black | Roan |
| | Brown | Sorrel | Appaloosa | Paint | Pinto |
| | Dun | Palomino | Buckskin | Cremello | Albino |
| | White | | | | |

Markings: _____

Registered Name: _____

Known Previous Show Names: _____

Microchip: _____ Tattoo #: _____ Freeze Brand : Y or N

2) **PEDIGREE INFORMATION** (if known)

Sire: _____ Breed: _____ Reg. #: _____

Dam: _____ Breed: _____ Reg. #: _____

Dam's Sire: _____ Breed: _____ Reg. #: _____

Breeder's Name: _____

3) **PREVIOUS OWNER'S INFORMATION** (if known)

Owner Name: _____ ARHPA #: _____

Address: _____

Email: _____

4) **CURRENT OWNER'S INFORMATION**

Owner Name: _____ ARHPA #: _____

Address: _____

Email: _____

By Submitting this application, I agree to abide by all ARHPA and USEF rules and verify that all information is correct.

Signature: _____ Date: _____

Select One: Owner Trainer Agent

Send to:
ARHPA
2755 Bunten Rd
Duluth GA 30096

OFFICE USE ONLY: Number Issued: _____ Certificate Issued: Yes No