



National Cutting Horse Association of Australia Inc.

(Incorporated under the Association Incorporation Act, 1984)

REQUEST TO CHANGE NAMED SLOT

I, _____ wish to change the name of my; (please tick one)

Non Pro Futurity entrant

Non Pro Derby entrant

Non Pro Classic entrant

From: _____ To: _____

Sire: _____ Dam: _____

Rego no: _____ DOB: _____ Sex: _____ Color: _____

Rider: _____

I have attached identification of named horse (ie; AQHA registration papers, Veterinary Certificate)

I have not attached papers at this time

*I hereby authorize the change of name for this entry to be recorded by the National Cutting Horse Association Inc., subject to this form being lodged with the Secretary of the NCHA within 7 days of the date of acknowledgment.

Name of Owner: _____ Signature: _____

Address: _____

Date requested: _____

Remittance:

✂-----

To: Secretary
National Cutting Horse Association Inc. (NCHA)
PO Box 7092 NEMSC
TAMWORTH NSW 2348

Payment of \$250.00 (per name change)

Please circle your form of payment Cheque / Money Order / Credit Card
(1.5% fee applies to credit cards – if the transaction is rejected, due to insufficient funds your payment will be considered as invalid and will not be processed)

Credit Card Number: / / / Exp: _____

Card Holders Name: _____ Card Holders Signature: _____