

# QUARTER HORSE, APPALOOSA or PAINT ONLY

## OKLAHOMA-BRED STALLION REGISTRY APPLICATION *BY BREED*\*

**APPLICATION DEADLINES AND FEES BY BREED:**

By February 1 prior to breeding season ..... \$ 100 ..... \$ 150  
Under late application (after February 1 and by June 30 of breeding season for remainder of season, but not retroactive) .. \$ 200 ..... \$ 300  
 Reaccreditation by February 1 prior to breeding season ..... \$ 100 ..... \$ 150  
 Reaccreditation after February 1 and by June 30 of breeding season, but not retroactive ..... \$ 200 ..... \$ 300  
 Reaccreditation hardship ..... \$ 200 plus application fee

**DUALBREED  
 APPL. FEE**

<i>FOR OFFICE USE ONLY</i>	
RECEIPT # / WO #	<b>R</b>
AMOUNT \$	_____
CHECK #	_____
PROCESSED BY	_____
DATE PROCESSED	_____
OKB #	_____
DATE REGISTERED	_____

- **APPROPRIATE FEE & COPY OF CERTIFICATE OF REGISTRATION SHOWING CORRECT OWNERSHIP MUST BE SUBMITTED WITH APPLICATION (ownership on Certificate of Registration must match ownership on application).**
- **CHECKS & BANKDRAFTS MUST BE SIGNED, OTHERWISE DOCUMENTS WILL BE REJECTED.**
- **ALL REQUIREMENTS MUST BE MET WITHIN ONE (1) YEAR FROM DATE SUBMITTED TO OHRC OR APPLICATION WILL BE REJECTED WITH NO REFUND OF FEE. ANSWER ALL QUESTIONS. IF NONE OR NOT APPLICABLE, PLEASE SO INDICATE.**

<b>A. STALLION INFORMATION:</b>	<b>IS THIS A REACCREDITATION?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO
Name of Stallion _____	
Breed _____ Registration No. _____	
Residence/Location of stallion (do not use P.O. Box):	
Farm Name and Address	City                      State                      Zip                      (       ) AC/Phone
Name of Farm or Stallion Manager _____ AC/Phone (       )	
Beginning date of domicile at above location _____ Previous Location, if known _____	
<p style="font-size: small;">A mailing address, such as a post office box number, does not always provide the necessary information regarding the location of the stallion. Please provide detailed instructions for finding the physical location of the ranch or farm where the stallion stands for service and may be inspected. Attach separate sheet and map, if necessary.</p> <p>_____</p> <p>_____</p>	

<b>B. OWNERSHIP INFORMATION:</b>	Ownership Name _____ <small>Ownership Name <u>Exactly</u> as shown on Certificate of Registration, or will be shown if registration is pending.</small>
Owner Address _____	
Street or Box	City                      State                      Zip
Email Address _____	
AC/Phone (       ) _____ SSN or Federal Tax ID No. _____	
<p style="font-size: small;">If ownership is that of a Partnership, Syndicate, Corporation, Stable Name, etc. (other than one individual or a husband and wife), furnish name and address of authorized agent or managing partner to whom correspondence is to be mailed.</p>	
Name	Address                      City                      State                      Zip                      (       ) AC/Phone
(If different from owner)	
_____ Number of individuals with an ownership interest in this entity. If more than one individual has an ownership interest in this entity, you are required to submit together with this application a list of all such individuals including the percentage of ownership for each individual.	

\*Complete a separate application for each breed.

