

North American Shagya-Arabian Society
Request for Replacement Certificate

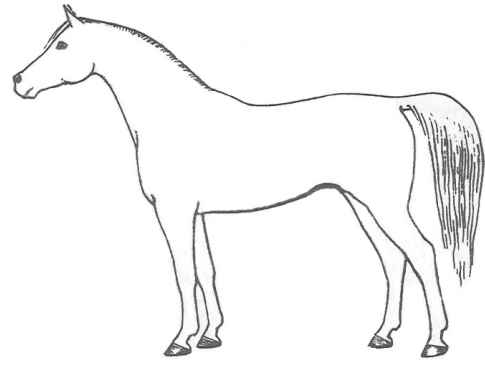
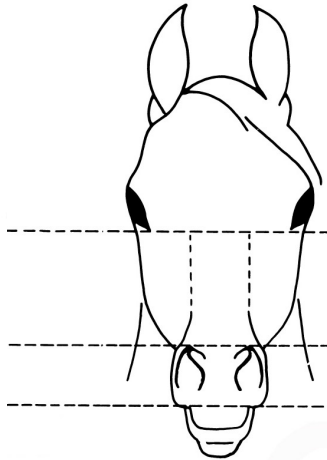
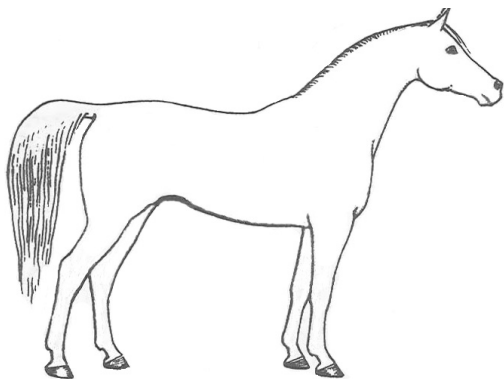


Name of Horse _____ D.O.B _____

Color _____ Registration Number _____

Markings: head _____
left fore leg _____
right fore leg _____
left hind leg _____
right hind leg _____
body markings _____
brands _____

(draw in markings)



Reason for replacement _____

Registered Owner Name _____

Address _____

Phone _____

E-mail _____

Signature _____ Date _____

Fee: \$40 (member) / \$85 (non-member)

Mail form to: NASS Registrar
Elaine Kerrigan
1479 Freshwater Rd.
Eureka, CA 95503

Mail payment to: NASS Treasurer
Beverly Thompson
2345 S. Washington Rd.
Columbia City, IN 46725

Or PayPal: Email: Treasurer@shagya.net