



# Consignment Form & Contractual Agreement

**Sale Date:** Friday, October 2 and Saturday, October 3, 2020  
Shawnee Expo Center • 1700 West Independence • Shawnee, OK 74802

<b>Consignment Fees:</b>	<b>Cattle Charge:</b>
<input type="checkbox"/> Friday . . . . . \$175	<input type="checkbox"/> \$50 Cutting Cattle Fee
<input type="checkbox"/> Saturday . . . \$275	<input type="checkbox"/> \$50 Roping Cattle Fee
<b>All Sales: 8% Commission • No Pass Out Fee</b>	

**Entry Deadline:** August 26, 2020  
Complete one form for each animal consigned, sign and date.

**Entries without a signature will not be accepted.**

Photo copies of this consignment form will be accepted for additional horses.

Horse's original registration papers **MUST** accompany this consignment form.

If horse is not yet registered, a copy of the horse's registration application **MUST** accompany this consignment form.

**HORSE NAME** \_\_\_\_\_

REG # \_\_\_\_\_

YEAR FOALED \_\_\_\_\_ COLOR \_\_\_\_\_

**MARE**      **SIRE** \_\_\_\_\_

**STALLION**      REG # \_\_\_\_\_

**GELDING**      **DAM** \_\_\_\_\_

REG # \_\_\_\_\_

It is the Consignor's responsibility to disclose ANY impairments, unsound conditions, or invasive surgery(s) applicable to this animal.

Check any that apply to the sale horse:

Cribber       Cryptorchid

Overbite       Slight Defect

Other \_\_\_\_\_

Engagements and/or eligibilities: \_\_\_\_\_

<b>BREEDING INFORMATION</b>	<input type="checkbox"/> BRED TO _____	LBD _____
FOAL AT SIDE IS	<input type="checkbox"/> COLT <input type="checkbox"/> FILLY	SIRE BY _____ DOB _____

**Please see the other side of this form for the Contractual Agreement and additional space for catalog notes.**

**Consigned by:**

Please check one.

OWNER

TRAINER

AGENT

**Due at time of entry:**

- Completed and Signed Consignment Form
- Original AQHA Papers. Any licence that apply.
- Completed and properly signed AQHA or APHA Transfer Report

**Due at time of sale:**

- Originals (not photo copies)
- A licensed veterinarian's HEALTH CERTIFICATE dated no earlier than 20 days prior to the Sale.
- A current negative COGGINS TEST dated no earlier than six (6) months prior to the Sale.

Proceeds go to: \_\_\_\_\_

Consignor's Name \_\_\_\_\_  
*if different than registered owner, the name you want to appear in the catalog*

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

e-mail \_\_\_\_\_

Address \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Contact:** Jennifer Anderson • 405-401-4759 • Fax 940-382-4404 • e-mail: jennifer@shawneehorsesales.com  
**Mail entries to:** Jennifer Anderson • 951 Berend Road • Pilot Point, TX 76258

