

AMERICAN SHIRE HORSE ASSOCIATION

est. 1885

FOR OFFICE USE ONLY
Date received
Payment
Date recorded

P.O. Box 227
Blair, NE 68008
secretary@shirehorse.org



Office: 888-302-6643
www.shirehorse.org

LEASE AGREEMENT

Lease Recording Fee - \$40 each time ASHA processes

I _____
(Recorded Owner/Lessor)

of _____
(Address) (City) (State) (Zip)

do hereby certify that I have leased the Shire Mare Stallion

_____ # _____ to
(Horse's Name) (Reg. Number)

(Lessee)

of _____
(Address) (City) (State) (Zip)

from _____ to _____
(Date) (Date)

or until such time as the lessor notifies the American Shire Horse Association in writing that the lease is terminated (*requires additional \$40 fee*).

The American Shire Horse Association is hereby authorized to accept the signature of the lessee on all applications for registration of foals born during the period as set forth above.

Signed _____ Date _____

Signed _____ Date _____

Include payment in US funds for Lease Recording Fee when submitting to ASHA at the address above.