

Consignment Form

2009 RUIDOSO NEW MEXICO-BRED QUARTER HORSE YEARLING SALE
RUIDOSO HORSE SALE COMPANY

Phone: 575-378-4474 FAX: 575-378-4788 Website: www.ruidososelectyearlingsale.com Email: DReed@RaceRuidoso.com
(Additional copies of this form may be reproduced or downloaded from the RHS website.)

To Be Held: August 21st & 22nd at the Ruidoso Horse Sale Pavilion, Ruidoso Downs, NM

ENTRY/WITHDRAWAL DEADLINE: May 1, 2009

Consignment Fee: \$450 at time of entry; \$500 if paid after deadline or from proceeds*

*If fees are to be withheld from proceeds, the original Registration Papers must accompany entry or the entry is unacceptable.

TO BE ELIGIBLE FOR THIS SALE, ALL ENTRIES MUST BE "ACCREDITED NEW MEXICO BRED".
REGISTRATION PAPERS MUST HAVE BEEN STAMPED BY THE NEW MEXICO HORSE BREEDER'S ASSN.
PRIOR TO ENTRY OR THE ENTRY IS INELIGIBLE FOR CATALOGING.
ALL ENTRIES PASSING THROUGH THE SALE RING ARE ELIGIBLE FOR NOMINATION TO THE
2010 NEW MEXICO BRED QH SALE FUTURITY!!

DUE AT TIME OF ENTRY:

Properly completed and signed Consignment Form.

Original Parentage-Verified Registration Certificate.

If registration is underway, send copy of Registration Application .

Completed AQHA Transfer Report.

TO ACCOMPANY HORSE TO SALE:

Original Health Certificate dated no earlier than 10 days prior to Sale.

An original negative Coggins Test dated no earlier than six months prior to sale date(send copy if available).

Coggins & Health to be turned in to Sales Office upon arrival.

CONIGNED BY:

(complete this line EXACTLY as you wish it to appear on the first line of the catalog.)

MAILING ADDRESS:

Street City State Zip

PHONE:

Residence Mobile FAX EMail

HORSE NAME:

(Name Requested if Registration is pending.)

Registration #

NMHB Registry #:

Date Foaled: Stallion Gelding Filly Color Embryo Transfer: yes

Sire QH TB Dam QH TB

Dam's Sire QH TB 2nd Dam QH TB

ENGAGEMENTS: Triple Crown B of A Challenge Lineage Other:

IMPAIRMENTS: Check If: Cribber Cryptorchid Sight Impaired Bleeder Wind Sucker Wobbler

Registered Owner(s)

AQHA ID#

AQHA ID#

MAILING ADDRESS:

Street/POB City State Zip

PHONE #

Residence Mobile FAX Email

NET PROCEEDS PAYABLE TO: proceeds will be disbursed as specified here. If more than one check is requested, indicate % to each payee. Net proceeds will be paid to Registered Owner unless the owner signs below relinquishing the funds to another.

NAME %

ADDRESS

NAME %

ADDRESS

Owner Signature:

(Sign here if proceeds go to other than Registered Owner.)

AGENT AUTHORIZATION: I

hereby authorize: to act as my agent, with authority on my behalf to do all acts and handle all matters deemed necessary, appropriate, or incidental by him/her to the sale of any animal owned by me and offered for sale at the Sale, including, but not limited to the Conditions of Sale appearing on the Consignor's Contract on the reverse side of this form.

Agent's Address:

Phone Mobile

Email FAX

Owner's Signature

FOR OFFICE USE ONLY:

DATE REC'D: DATE LOGGED: DATE ENTER IN COMPUTER BY

DOCUMENTS: REG.CERT. COPY REG. APPLIC TRANSFER COGGINS dated

FEES: PAID \$ CK # or To Be Held From The Proceeds Of

UNPAID ADD \$50.00 OTHER LATE FEES:\$ FOR