



Tennessee Walking Horse Breeders' & Exhibitors' Association  
250 North Ellington Parkway, Lewisburg, TN 37091  
(931) 359-1574  
info@twhbea.com • www.twhbea.com

# ACKNOWLEDGEMENT OF A SOLD HORSE

Name (current owner of record): \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Horse Name

Horse Registration Number

I, \_\_\_\_\_, the undersigned, hereby state that I no longer have any interest, financial or otherwise, in this horse.

I agree to hold TWHBEA harmless for any transfers of ownership of this horse to another party, and I am not responsible for transfers.

The horse named above was sold by me or a personal agent representing me on (date, if known) \_\_\_\_\_, or approximately \_\_\_\_\_ (days, months, years) ago.

The horse was sold to (contact info of buyer, if known):

Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Signature (owner of record): \_\_\_\_\_ Date: \_\_\_\_\_

## Payment

**Fee of \$20 per horse**

Amount Owed: \_\_\_\_\_ Payment Method: Check VISA AMERICAN EXPRESS

Card Number: \_\_\_\_\_ DISCOVER MASTERCARD

Exp Date: (mm/yy) \_\_\_\_\_ CVV: \_\_\_\_\_ Authorized Signature: \_\_\_\_\_

Billing Address: Same as above

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_