



Paso Fino Horse Association, Incorporated

1003 Twilight Trail Suite 2, Frankfort, KY 40601 (859) 689-3700 FAX(859) 689-3702 www.pfha.org

LEASE CANCELLATION NOTICE

The Lease on the horse _____ PFHA Registration Number: _____ is hereby cancelled. The ending date of the lease should be recorded as _____ (MM/DD/YYYY)

RECORDED OWNER(S) OF THE HORSE BEING LEASED:

Last Name: _____ First Name: _____ Middle Initial ____ PFHA MEMBERSHIP NUMBER: _____
Last Name: _____ First Name: _____ Middle Initial ____ PFHA MEMBERSHIP NUMBER: _____
Address: _____
City: _____ State: _____ Country: _____ Zip: _____
Home Phone: _____ Cell Phone: _____ Work Phone: _____
Fax: _____ E-Mail Address: _____
Signature: _____ Date: _____ (MM/DD/YYYY)
Signature: _____ Date: _____ (MM/DD/YYYY)

LESSEE(S):

Last Name: _____ First Name: _____ Middle Initial ____ PFHA MEMBERSHIP NUMBER: _____
Last Name: _____ First Name: _____ Middle Initial ____ PFHA MEMBERSHIP NUMBER: _____
Address: _____
City: _____ State: _____ Country: _____ Zip: _____
Home Phone: _____ Cell Phone: _____ Work Phone: _____
Fax: _____ E-Mail Address: _____
Signature: _____ Date: _____ (MM/DD/YYYY)
Signature: _____ Date: _____ (MM/DD/YYYY)

INSTRUCTIONS:

1. During the effective term of the lease, the Association will not record subsequent changes in ownership until the lease is terminated.
2. There is no fee for filing this cancellation.
3. Mail this form to:

Paso Fino Horse Association; 1003 Twilight Trail Suite 2 Frankfort, KY 40601