LEASE AUTHORIZATION

| Name of Horse: | |
|---|---|
| Registration Number: | |
| The above has been leased from | |
| (Owner | /Lessor) |
| | |
| to(Lessee) | |
| , , , | |
| For the period beginning on | |
| And ending | |
| Details: | |
| | |
| | |
| | |
| | |
| | |
| | |
| Lessee's Mailing Address: | |
| Lessee's City, State & Zip Code: | |
| Lessee's Phone Number: | |
| The lessee is authorized to sign all pertinent documents pertaining | g to this horse during the period of the lease. |
| Owner's Mailing Address: | |
| Owner's City, State & Zip Code: | |
| Owner's Phone Number: | |
| Lessee Signature: | Date: |
| Owner Signature: | Date: |
| County of | |
| Subscribed in my presence and sworn to before me this | |
| Day of, 20 | |
| · ———————————————————————————————————— | |