Application
for New Registered Stallion Syndicate

USTA Number

I hereby apply for registration of a Stallion Syndicate. The Syndicate may be registered with the Association, giving the names of shareholders, the syndicate manager and a corresponding officer. The Registrar shall be notified immediately if additional persons become associated with a registered syndicate or if some person listed in the syndicate disassociates himself from the syndicate. Two syndicates cannot be registered with the same name and is subject to rejection based upon the name or exceeding the 25-character limit.

NAME OF STALLION SYNDICATE TO BE REGISTERED

PLEASE PRINT

First choice

Second choice

Third choice

NAME OF STALLION: _____

Address

Address pt. 2

City

State and Zip Code

SYNDICATE MANAGER

The syndicate manager's signature is required on all documents pertaining to changing corresponding officers and adding and removing shareholders.

Member No: _____ Name: _____

Signature: _____ Date: _____

CORRESPONDING OFFICER

The corresponding officer's signature is required to transfer ownership, submit a list of mares bred and release mating certificates.

Member No: _____ Name: _____

Signature: _____ Date: _____

SYNDICATE SHAREHOLDERS (if more space is needed, please attach a separate sheet)

Share No(s): _____ Member No: _____ Name _____

Share No(s): _____ Member No: _____ Name _____

Share No(s): _____ Member No: _____ Name _____

Share No(s): _____ Member No: _____ Name _____

PAYMENT INFORMATION (Fee to register a Stallion Syndicate is $173)

Please do not send cash. **For U.S.:** Pay by check, money order or credit card in U.S. funds only. **Outside U.S.:** Payment is by credit card ***only***.

TOTAL AMOUNT ENCLOSED $ _____

Payment Method: ❑ Check ❑ Money order ❑ Visa/MasterCard Name as appears on card: _____

Complete only if paying by credit card: **CVV Code**

Expiration date: _____/_____ Signature: _____

U.S. Trotting Association
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