



# Cancellation of Authorized Agent

Please cancel the assignment of Authorized Agent between

\_\_\_\_\_, USTA No. \_\_\_\_\_ and  
(please print member's name)

\_\_\_\_\_, USTA No. \_\_\_\_\_  
(please print agent's name)

For

- \_\_\_\_\_ All work pertaining to the USTA
- \_\_\_\_\_ List of Mares Bred only
- \_\_\_\_\_ Foal Registration only

For

- \_\_\_\_\_ All the horses I own
- \_\_\_\_\_ Only the horses listed below:

_____	Reg No. _____
_____	Reg No. _____
_____	Reg No. _____
_____	Reg No. _____
_____	Reg No. _____
_____	Reg No. _____
_____	Reg No. _____

Effective: Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

\_\_\_\_\_  
Signature of USTA member Date

\_\_\_\_\_  
Signature of Authorized Agent Date

**There is no fee to record this information.**

**Email to [memberservices@ustrotting.com](mailto:memberservices@ustrotting.com).**



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