

**HORSE TRANSFER OF OWNERSHIP FORM**

Date: \_\_\_\_\_

Name of Horse: \_\_\_\_\_

PREVIOUS OWNER: \_\_\_\_\_  
(As given on entries and LAHJA Membership Card)

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

\_\_\_\_\_

Telephone: \_\_\_\_\_ LAHJA# \_\_\_\_\_

NEW OWNER: \_\_\_\_\_

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

Telephone: \_\_\_\_\_ LAHJA# \_\_\_\_\_

Please email this form to [info@lahja.org](mailto:info@lahja.org) or mail it to the LAHJA Office – 11127  
Orcas Ave, Lake View Terrace, CA 91342