AMHA

THE AMERICAN MINIATURE HORSE ASSOCIATION, INC.

5601 S Interstate 35 W • Alvarado, Texas 76009 (817) 783-5600 • FAX (817) 783-6403 http://www.amha.org

AMHA AOTE Member Of Household (MOH)Opt-Out Declaration Form

This form must be received in the AMHA office prior to the horse being handed to a trainer or non-family member, for the horse named below to opt out of any AMHA AOTE classes.

I have chosen to opt out of the AMHA AOTE MOH program with the horse listed below. I

understand by doing so, that I mayear.	y not show this hor	se in any AOTE classes	until the next calenda
Effective Date (effective date may not be during an AMHA show)			
Horse's AMHA Registration Num	aber- One horse pe	r form	
Horse's Registered Name			
Owner/Member Of Household (p	please print		
Address	City	State	Zip
Owner's Phone Number	Email address		
Owner's Signature			
Member Of Household Signature			
AOTE Opt Out Fee: Fees are pa	yable in U.S. funds	only and must accompar	ny form.
AOTE Opt Out Fee- \$10.00 per	horse.		
☐ Check or Money Order	□ CC	□ PayPal	
Credit Card No.:	Expiration Date:		
Name on Card:	Bill	ling Zip Code	CVV
Signature: Applicant agrees to abide by all the Rules			

Please see the AMHA rule book for complete AMHA AOTE Rules.