

Kentucky Miniature Horse Breeders Club

Lease Form for Breeding purposes only

Registered Name of Horse _____ Reg# _____

Leased from (owner/lessor): _____

Leased to (lessee): _____

Beginning Date: _____ Ending Date: _____

X: _____

Signature of Lessor

Address: _____

City, State, Zip Code _____

Phone: _____

Email: _____

X: Signature of Lessee

Address: _____

City, State, Zip: _____

Phone: _____

Email: _____

Please mail form, a copy of the AMHA lease form and a color copy of the
nominated horse's registration form to:
Kentucky Miniature Horse Breeders Club
15218 Abington Ridge Place
Louisville, KY 40245