



Triple Crown 100  
Stallion Incentive  
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## Change of Ownership for Enrolled Horses

Horse Name \_\_\_\_\_ Registration # \_\_\_\_\_ DOB \_\_\_\_\_

Sire \_\_\_\_\_ Dam \_\_\_\_\_

Previous Owner \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

New Owner \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

New Owners Signature \_\_\_\_\_ Date \_\_\_\_\_

\*\*Must include copy of papers with current owner name

Mail to: Triple Crown 100 - P.O. Box 1762, Milledgeville, GA 31059  
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