



The Arabian Horse Society of Australia Ltd.

ABN 12 001 281 590

Street Address: Unit 12, 40 Bowman Street RICHMOND NSW 2753

Postal Address: Post Office Box 415 RICHMOND NSW 2753

Telephone: 02 - 45775366 Fax: 02 - 45877509

Email: secretary@ahsa.asn.au

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FORM OF AUTHORITY IMPORTANT NOTES

IT IS A GENERAL REQUIREMENT OF THE SOCIETY that all persons involved in ownership or lease of an Arabian horse must together sign most documents lodged with The Society's Registry.

In many cases consideration can be given to the lodgement of a **Form of Authority** with The Society to enable one or more persons to sign on behalf of other persons all documents and correspondence to be lodged with The Society's Registry that require a signature.

Thus, if a partnership, joint ownership or corporation exists, or if it is intended to give authority to an agent, such as a manager or other person not part of any ownership entity, the facility exists for notifying The Society of your intentions regarding the signing of Registry Documents and Correspondence.

In the case of a corporation. It is mandatory for a form of Authority to be lodged under Common Seal giving authority to one or more persons to sign either solely, jointly or alternatively.

In considering the use of this facility, careful thought should be given by all persons involved as to their relationship with each other, not only at the time of preparing the Authority, but also in the future.

REVOCAION OF AUTHORITY

In all cases (other than for a corporation) a Form of Authority shall be considered revoked if The Society receives **a written advice from any one** of the persons involved in giving the original Authority, that they no longer wish the authority to apply. In the case of a corporation such revocation must be under its Common Seal.

FURTHER NOTE FOR CORPORATIONS

Affix Common Seal in signatories section of this form.

WHEN COMPLETE: Lodge with The Society, no fee is required.

INCOMPLETE OR UNCLEAR FORMS OF AUTHORITY

If a lodged form is incomplete, incorrect, or the intentions are not clear, the form will be returned by The Society as not acceptable AND A FRESH FORM OF AUTHORITY WILL HAVE TO BE COMPLETED BY ALL PARTIES AND LODGED AGAIN. This is necessary to protect the interests of all parties and The Society.

SOCIETY MEMBERSHIP

This form of authority has no validity with respect to Society membership. Its purpose and scope is confined to Registry documents and correspondence only.

OWNERS RESPONSIBILITIES

At all times the responsibility to lodge documents meet deadlines and otherwise comply with The Society's Regulations, requirements and conditions rests with the owners of horses. Any default error or failure to comply with The Society's requirements on the part of authorised signatories shall not be grounds for any special considerations to be extended to owners. Owners must also note that a Form of Authority is not an alternative to any leasing arrangements or requirements contained in The Society's Regulations.



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**THE ARABIAN HORSE SOCIETY OF AUSTRALIA LIMITED
 FORM OF AUTHORITY
 FOR PARTNERSHIPS, JOINT OWNERS, CORPORATIONS
 AND PRINCIPALS USING AGENTS**

1. PLEASE READ NOTES ON REVERSE BEFORE COMPLETING.
2. COMPLETE **ALL THREE** SECTIONS OF THIS FORM.
3. PLEASE SPECIFY WHICH TRANSACTIONS AUTHORITY APPLIES TO.

Unless otherwise directed, I/We hereby authorise The Society to accept the signature(s) of the person/persons listed in the schedule below to effect any application on my/our behalf for Registration, Transfer, Return of Lease, Mare or Stallion Returns or any other document required by the Society's regulations for any authorised transaction in respect of all Purebred Arabians or of any other horse registered or eligible to be registered in any Register maintained by the Society from time to time and in the following manner:-

THIS SECTION MUST BE COMPLETED (Tick relevant box)

ONE PERSON TO SIGN SOLELY*

ANY ONE OF THE PERSONS LISTED IN THE SCHEDULE TO SIGN SOLELY*

ALL PERSONS LISTED IN THE SCHEDULE TO SIGN JOINTLY*

(DESCRIBE ANY OTHER ALTERNATIVE TO THE ABOVE)

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THE SCHEDULE OF PERSON(S) AUTHORISED TO SIGN:

	SURNAME(S)	ALL OTHER NAMES	SPECIMAN SIGNATURE(S)	M/SHIP NO.
1
2
3
4

THIS SECTION MUST BE COMPLETED BY ALL OWNER(S):
 Names and Signature(s) of ALL PRINCIPALS, PARTNERS, JOINT OWNERS
 (or officer/directors of a corporation) giving authority

	SURNAME(S)	ALL OTHER NAMES	SPECIMAN SIGNATURE(S)	M/SHIP NO.
1	}
2	
3	
4	
5	
6	
7	
8	

DATED THIS day of 20.....