

Lease Termination Form



Horse's Name (as shown on NRHA Competition License)	Competition License Number

The Above Has Been Leased From (OWNER INFORMATION):

Name		NRHA ID Number	
Mailing Address		City	
State	Zip / Postal Code	Country	
Phone	Fax	Email	

To (LESSEE INFORMATION):

Name		NRHA ID Number	
Mailing Address		City	
State	Zip / Postal Code	Country	
Phone	Fax	Email	

Termination Agreement:

Lease termination date will be recorded as the date this form is received in the NRHA office.

Must be signed by one of the two parties below.

Owner's Signature	Date (Month, Day, Year)
Lessee's Signature	Date (Month, Day, Year)

MAIL: NRHA, 3021 W. Reno Avenue, Oklahoma City, Oklahoma 73107

EMAIL: memberships@nrha.com

ONLINE: nrha.com in ReinerSuite

FOR OFFICE USE ONLY	Date Received:
----------------------------	----------------