



Belgian Draft Horse Corporation of America
 P.O. Box 335 • Wabash IN 46992 • 260-563-3205 • Fax: 260-274-4194
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APPLICATION FOR DUPLICATE CERTIFICATE

Owner Name: _____
PRINTED

Member/Non-Member #: _____

Name of Animal: _____

Animal's Registration Number: _____

I wish to apply for a Duplicate Certificate of Registry for this animal.

I did have the certificate of registry for this animal, and I have made a careful search for this certificate but failed to find it and believe it to be lost, or accidentally destroyed beyond hope of recovery. I request that the Belgian Draft Horse Corporation of America issue a duplicate certificate of registry for this animal.

Today's Date: ____/____/____ (month, day, year)

Signature: _____
(DO NOT PRINT)

**Please return this signed and dated form along with your \$20 payment to our office.
 Belgian Draft Horse Corporation • P.O. Box 335 • Wabash, IN. 46992**

Check Enclosed Credit Card – Credit Card# _____ CCV Code _____

Exp. Date: ____/____ Signature: _____

Printed Name: _____ Billing Zip Code # _____

Check this box if you want your credit card information kept on file.