



Tomorrow's Legends

Owner Change Form

Horse Information

Horse Registered Name _____

Sire Name _____

Dam Name _____ Dam's Sire: _____

Birth Year _____ Reg. # _____

Previous Owner Information

Name _____

Full Address _____

Phone _____ E-mail _____

New Owner Information

Name _____

Full Address _____

Phone _____ E-mail _____

By Signing this form and enrolling Tomorrow's Legends, I agree to allow this horse and/or my image and/or likeness to be used by Tomorrow's Legends as they see fit for advertising purposes.

New Owner Signature:

Send Enrollment Form, Copy of Registration Papers, and payment to:

Tomorrow's Legends • PO BOX 330 • Ontario OH 44862

• Ph 614-806-8719 • E-mail: Enrollments@TomorrowsLegendsllc.com



Tomorrow's Legends Owner Change Form

Send Enrollment Form, Copy of Registration Papers, and payment to:

Tomorrow's Legends • PO BOX 330 • Ontario OH 44862

• Ph 614-806-8719 • E-mail: Enrollments@TomorrowsLegendsllc.com