USEF NATIONAL Passport Application

Return completed form by:
Fax: (859) 231-6662 or
Mail to: United States Equestrian Federation
Attn: Passports
4047 Iron Works Parkway
Lexington, KY 40511-8483

1. This application is for horses at competitions for which approval of Federation National Passports has been granted by the FEI. The National Passport serves as a way to identify the horse by diagram and record the influenza vaccination history. An approved National Passport can easily be upgraded to an FEI Passport as a Recognition Card once the horse reaches the level requiring an FEI Passport.
2. The horse must be Life Recorded with the United States Equestrian Federation (USEF). If your horse is not recorded, please include the current Horse Recording Application and $200. If your horse is Annually Recorded, please select **Upgrade to Life** at the bottom of this form and include the fee of $125.00.
3. The owner of the horse must be a United States Citizen. If not, please contact the Passport Department at (859) 258-2472.
4. If you are competing in an FEI International Competition, please note that FEI Registrations are **mandatory** and may be included with this application.

HORSE DISCIPLINE: _____ **FEI Registration Number:** _____

USEF Horse Recording Number (MANDATORY): _____

Full Horse Name: _____ (exactly as recorded with USEF)

Sex (circle one): Mare Gelding Stallion Foal Date: _____ Color of horse: _____

Breed: _____ Country of Birth: _____ Breeder: _____

Breed Registered Name: _____ Breed Registration Number: _____

Sire: _____ Dam: _____

Sire of Dam: _____ Microchip Number: _____

OWNER INFORMATION: Owner USEF Membership Number (MANDATORY): _____

Owner Name: _____ Owner Nationality: _____

Address: _____

City: _____ State: _____ Zip: _____

E-mail: _____

Owner's Signature: (Agent signatures are not accepted) _____

IMPORTANT Contact Information and Shipping Address for Passport (if different from above)
(MUST BE PHYSICAL ADDRESS ONLY - OUR STANDARD SERVICE IS UPS 2-DAY DELIVERY):

Name: _____ E-mail Address: _____

Physical Address: _____

City: _____ State: _____ Zip: _____

Phone Number: (_____) _____ Cell Phone: (_____) _____

Passport Fee: **$50.00**

❑ Check here to upgrade to USEF Life Recording: **$125.00**

❑ Check here to charge upgrade to Next Day Air to the below credit card (all incurred charges to be paid by applicant)

PAYMENT INFORMATION. DO NOT DETACH.

Enter amount from above
TOTAL AMOUNT ENCLOSED: $ ☐☐☐☐☐☐☐☐.☐☐

PLEASE DO NOT SEND CASH (Make Check Payable to: United States Equestrian Federation).
❑ Check #_____ ❑ Visa ❑ Master Card

Card Number: **Exp. Date:**

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Card Holder's Name (Print) _____ **Billing Zip Code**

Card Holder's Signature _____ ☐☐☐☐☐