



Shetland Pony Society of North America

Lease Certificate

Registered Name of Pony: _____

SPSNA Registration Number: _____

I hereby certify that on the _____ day of _____ 20____, I have leased the pony listed above to:

Lessee Name: _____

Lessee Address: _____

Lessee Phone: _____

...for the period from date of lease to _____ day of _____ 20____ (specific date required).

Owner Signature: _____ Date: _____

Printed Name of Owner: _____

Complete Owner Address: _____

Owner Phone: _____

Owner Email: _____

Return **original** SPSNA registration paper, this application, and a check or money order for \$15 (SPSNA members) or \$25 (non-members) made out to **Shetland Pony Society of North America** to:

SPSNA
Treasurer
241 Grove Rd
Stewartstown, PA 17363

Questions? Email shetlandponysociety@hotmail.com or call 717-993-3775.