

*MINNESOTA ARABIAN HORSE BREEDERS, INC.
MEDALLION STALLION FUTURITY*

PERFORMANCE DIVISION NOMINATION FORM

Medallion Stallion: _____

Horse To Be Nominated: _____ AHA # _____

Date Of Birth: ____/____/____ Dam's Name: _____

Your Name: _____

Farm Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

E-Mail: _____

Telephone: (____) _____ Work/Barn: (____) _____

Signature: _____

** It is your responsibility to notify the MAHB Treasurer of any change of address or change in ownership of the horse.**

ELIGIBILITY: Sire must be current Medallion Stallion or Medallion Stallion in year bred.

NOMINATION FEE: \$500.00

PLEASE INCLUDE WITH THIS FORM: NOMINATION DUES AND A COPY OF BOTH SIDES OF YOUR HORSE'S AHA REGISTRATION CERTIFICATE.

MAKE CHECK PAYABLE TO: MINNESOTA ARABIAN HORSE BREEDERS, INC.

OR Charge the following credit Card: (Mark One): Visa _____ MasterCard _____ AMEX _____

Account Number: _____ Expiration Date: _____ Security Code _____

Card Holder's Signature: _____

***Return Form and Payment to:
MAHB, 5779 230th Street East, Elko, MN 55020***

For MAHB Use Only:

Fee Paid: _____ Date Received: _____ Postmark Date: _____ Initials: _____