NO STAPLES PLEASE

AHA 1007 (Rev. 3/23)



6030 Greenwood Plaza Blvd Suite 100 Greenwood Village, CO 80111

ArabianHorses.org info.comp@arabianhorses.org 303.696.4500

BREEDERS SWEEPSTAKES ENROLLMENT FORM NON-ARABIAN NOMINATED SIRE

Current AHA Membership is required for participation in all AHA Programs. Breeding Entries are due by December 31 of the breeding year. In order for your Sire's foals to be eligible, his Non-Arabian Nominated Sire entry must also be postmarked by December 31 of the breeding year. Non-Arabian Nominated Sire entry fee is \$2,000, late entries are accepted for both Non-Arabian Nominated Sires and Breeding Entries between January 1 and February 15 with an additional \$100 late fee. All fees are subject to change, please call AHA for current fees. Refer to the current AHA Handbook Chapter 18 for specific rules, regulations and deadlines. Please print clearly in Blue or Black ink.

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Horse Registry	Registration #	Hors	Horse Name			
Date of Foaling /	/ S	Sex				
Month Da Sire Registry	y Year Registration #	Sire	Name_			
Dam Registry		n #Dam Name				
PLEASE ATT	TACH A COPY OF THE CE	ERTIFICATE OF REGIS	TRATION FOR YOU	R SIRE		
Are you a new member to AHA?	YES 🗆 N	□ NO If No, AHA Membership #				
Name						
Address		E-Ma	nil			
City		State/ProvZip/Postal				
		Fax # _				
Social Security or Taxpayer I.D. #		D	ate of Birth		/ Year	
□ Adult Membership-One Year □ Adult Membership-Three Year □ Youth Membership □ **Business Membership □ Life Membership *Competition Cards will be issued to Individual Membership *Club Dues collected by AHA will be for Individual Membership will have competition	als ONLY. Life Memberships in privileges for no other purpo	include a Competition Card ose than Recorded Owners	l. hip.		\$ \$ \$ \$ \$ ompetition Card.	
In making this application, I declare that I w the Articles of Incorporation, Bylaws, Rules knowledge of which I now have or will imme	and Regulations of the Ara					
Signature		Date				
*If not an individual applicant, print business	s title					
Method of Payment (U.S. Funds Only):	☐ Check Enclosed/Payable to A	NHA SM Check #		*Credit Charge \$		
*Effective June 1, 2019, a required 3% Convenience if the customer submits payment by cash, check o		e added by AHA to payment	-			
Credit Card Number (MasterCard/Visa/Amex/Discove	r) Print i	Name (as it appears on credit	card)	piration Date		
Cardholder's Signature	Credit	Credit Card Holder's Billing Address (Street, City, State, Zip/Postal Code) (Mandatory)				