



Foal Nomination Form 2017

Name of Foal Owner: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: Home \_\_\_\_\_ Cell \_\_\_\_\_ Fax \_\_\_\_\_

Email: \_\_\_\_\_

Foal's Registered Name		
Foal Registration No.	Sire's Name	Sire's Registration No.
Foal Date of Birth	Dam's Name	Dam's Registration No.

**(Attach a color copy front and back of foal's AMHA Registration papers).**

Breeder's Name: \_\_\_\_\_ AMHA Membership No. \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: Hm/Cell \_\_\_\_\_

**AFFIDAVIT OF REGISTRATION INFORMATION BY OWNER.** I hereby certify that: said horse meets the requirements set forth by the KMHB IF; the information on this form is correct and I understand that if the information on the form changes and the form is no longer correct, I am required to amend the form within thirty (30) days after the information changes; I assume full responsibility for the registration of said horse as a KMHB IF Registered Horse and agree that if a horse is later proved to be ineligible due to false or misleading information provided in this form that: (1) the nomination may be denied, suspended or revoked; (2) I may be forever barred from registering foals for the KMHB IF; and (3) I may be subject to civil and criminal penalties under the laws of the Commonwealth of Kentucky for providing fraudulent information. Furthermore, I agree to promptly provide any additional information to the official KMHB IF Manager upon request to confirm information submitted with this nomination, or nomination may be denied, suspended or revoked.

\_\_\_\_\_  
Owner (print name) (signature) Date \_\_\_\_\_

**Nomination Deadline and Fees:**

1. Nomination must be made by December 1<sup>st</sup> of birth year. Foals must be nominated by August 1<sup>st</sup> in order to earn points in their foaling year. A \$50.00 dollar fee must accompany this form.
2. Foals nominated after December 1, 2017 will be assessed a late fee of \$100.00 per month, plus the regular nomination fee of \$50.00.

**Eligibility for KMHB IF Program:**

1. Stallion and Mare must be nominated in the KMHB IF. Non-Kentucky residents must submit: 1) a Foaling Verification Form (see Rules Section C. Mares 1. c); and 2) a copy of the mare's board bill while in Kentucky.
2. You must be a member in good standing with KMHB and AMHA.
3. All foals must have been conceived and foaled in Kentucky.

**\*\*\*Forms will be returned if they are not filled in properly.**

Please mail form and payment to:  
**Kentucky Miniature Horse Breeders Club**  
 1219 Harry Wise Road  
 Lawrenceburg, KY 40342

OFFICE USE ONLY
CHECK NO. _____
AMOUNT _____
DATE PROCESSED _____