



Stallion Nomination Form 2017

Name of Stallion Owner: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: Home _____ Cell _____ Fax _____

Email: _____

Stallion's Registered Name _____ AMHA Reg. # _____

Farm name where Stallion is located during 2017 Breeding Season: _____

If the stallion location address is the same as the above address there is no need to fill in address below.

Address of Stallion Location: _____

City: _____ State: _____ Zip: _____

Farm Web Site: _____

Email: _____ Phone: Hm/Cell _____

Statements of KMHB IF Compliance:

- 1. I am a member of AMHA & KMHB.
- 2. Stallions must be nominated by February 1, 2017. A \$100.00 per month late fee, plus the nomination fee, will apply to all applications postmarked after February 1, 2017.
- 3. I have submitted a color photocopy front & back of the AMHA Certificate of Registration for this stallion.
- 4. I will file a Sales & Use Tax Return along with Form 51A132 by December 31, 2017. (if applicable)
- 5. By January 15, 2018, I will submit a signed copy of the AMHA stallion breeding report to KMHB following the breeding season to confirm mares were bred in Kentucky during 2017. Reports postmarked after January 15, 2018 will be assessed a late fee penalty (see Rules Section C. Stallions 4. b). Out-of-state residents must furnish a copy of stallion's board bill while in Kentucky along with the report.
- 6. *I have read the KMHBIF Rules & Regulations and Bylaws and agree to abide by them. Any attempt in connection with the Kentucky Horse Breeders' Incentive Fund to provide false or misleading information to the Kentucky Miniature Horse Breeders (KMHB) or government officials, or to otherwise engage in fraudulent activity, shall result in appropriate disciplinary action by the KMHB and the application of all civil and criminal penalties that may apply.*

By signing below, I acknowledge that I have read and agree to the statements above.

Signature of Stallion Owner

Date

Nomination Fee: \$100.00 (Please make check payable to KMHB)

Please note: Payment and a **COLOR** copy front and back of the registration papers must accompany this form. **Form will be returned if not filled in properly or conditions of compliance are not met.**

**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 _____