## 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 Treas	surer of any change of address or change in ownership of the horse. **
ELIGIBILITY: Sire must be current Medalli NOMINATION FEE: \$500.00	ion Stallion or Medallion Stallion in year bred.
	VATION DUES AND A COPY OF BOTH SIDES OF YOUR S'S AHA REGISTRATION CERTIFICATE.
MAKE CHECK PAYABLE TO: MINNESOTA ARABIAN HORSE BREEDERS, INC.	
OR Charge the following credit Card: (Mark One)	): Visa MasterCard
Account Number:	Expiration Date:
Card Holder's Signature:	
MA	Return Form and Payment to: AHB, Inc 18080 County Road 2 Chatfield, MN 55923
For MAHB Use Only:	

Fee Paid: \_\_\_\_\_ Date Received: \_\_\_\_ Postmark Date: \_\_\_\_ Initials: \_\_\_\_