

AGED IOWA NOMINATIONS

Due April 15, 2017



Every column must be complete for your horse to be nominated. **Blank column = NO NOMINATION**

HORSE NAME	IA REG # (Not USTA #)	SEX	AGE	GAIT	SIRE	DAM	OWNER(s)	Owner Social Security Number

*****We need your Iowa-Registered # NOT your horse's USTA #. If you do not have the number, call the Iowa Dept of Ag - Horse & Dog Dept at 515-281-4103*****

This nomination is made with the understanding and agreement that participation in the races of the Iowa Harness Horseman Association is subject to all rules, conditions, and decisions of the Iowa Harness Horseman Association and the United States Trotting Association (including but not limited to drug testing). I hereby state that if I am not an owner of the above described horse(s), **I HAVE FULL AND COMPLETE AUTHORITY AS THE OWNER(S)'S AGENT TO OBLIGATE THE OWNER(S) OF THE HORSE(S) TO THE TERMS OF THIS NOMINATION DOCUMENT.**

Signature

Date

NOMINATOR: _____
 ADDRESS: _____
 CITY/STATE/ZIP: _____
 PHONE: _____

CHECKS PAYABLE TO: Iowa Harness Horse Association

SEND NOMINATIONS TO: Iowa Harness Horse Association
 Gretchen Springer
 12816 Vale Blvd
 Floris, IA 52560

Due April 15, 2017

PAC contribution (optional) _____ x \$15 = _____
 Membership dues _____ x \$15 = _____

Membership Total = _____

Number of Horses _____ x \$100 = _____
 Penalty Payment _____ x \$100 = _____
(penalty applies if paid after April 15, 2017)

Nomination & Penalty Total = _____