



# 2012 AjPHA Hopes & Dreams Slot Nomination Form

Name your Slot Horse & Exhibitor by May 15, 2012



**\*The slot nomination form and the final payment of \$200 must be received in the APHA office by May 15, 2012.** \$50 late fee. Late enrollment will be accepted until 5 p.m. the day before the class (\$400 + \$100 late fee.) No refunds or substitutions except upon the death of the horse. Please complete one form per slot. **For horse and exhibitor eligibility requirements, go to [aphaworldshow.com](http://aphaworldshow.com).**

Class: \_\_\_\_\_ Slot #: \_\_\_\_\_

Slot Owner Name: \_\_\_\_\_

Horse: \_\_\_\_\_ Registration #: \_\_\_\_\_  
(If the horse's registration is pending, please list the Sire and Dam below.)

Sire: \_\_\_\_\_ Registration #: \_\_\_\_\_

Dam: \_\_\_\_\_ Registration #: \_\_\_\_\_

Exhibitor Name: \_\_\_\_\_

Is the exhibitor a current member? \_\_\_\_\_ Yes \_\_\_\_\_ No Exhibitor's Membership I.D. #: \_\_\_\_\_

Exhibitor's Address: \_\_\_\_\_

Exhibitor's City: \_\_\_\_\_

Exhibitor's State: \_\_\_\_\_ Exhibitor's Zip: \_\_\_\_\_ Exhibitor's Phone: \_\_\_\_\_

Exhibitor's E-mail: \_\_\_\_\_

## Payment:

2012 AjPHA membership (all exhibitors must have a current AjPHA membership). ☐ 1-year \$20 ☐ 3-year \$40 ☐ j-Term 5-year \$100

☐ Check or Money Order Enclosed ☐ MasterCard ☐ Visa ☐ American Express Total payment: \$ \_\_\_\_\_

Card Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CVV#: \_\_\_\_\_

Name as it appears on Card: \_\_\_\_\_ Cardholder's APHA I.D. # \_\_\_\_\_

Signature: \_\_\_\_\_

## Stalling:

Every horse entered in the AjPHA World Championship Show must have a stall. Stall reservation forms are included in the show Premium Book or can be found online at [aphaworldshow.com](http://aphaworldshow.com). Be sure to reserve a stall for your slot entry.

## Agreement:

By signing this document, I verify that the above horse and exhibitor are eligible to show in the above slot class. I agree that should the exhibitor become ineligible to show between now and the start of the show, I will contact APHA before 5 p.m. the day before the slot class to substitute the exhibitor with a \$50 fee. **For horse and exhibitor eligibility requirements, go to [aphaworldshow.com](http://aphaworldshow.com).**

Printed name of person completing form: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## Return this form to:



Attn: Performance Department

P.O. Box 961023, Fort Worth, Texas 76161-0023

Physical Address: 2800 Meacham Boulevard, Fort Worth, Texas 76137

kutecht@apha.com • (817) 222-6444 • FAX (817) 222-8489