



# NRHA NORTH AMERICAN & EUROPEAN 2019 NOMINATION/COMPETITION LICENSE FORM

## NOMINATION FEES 2010 & OLDER FOALS

The Nomination fee is a one-time payment and must be received in the office by January 10. Nominations received between January 11–31 will be charged a late fee.

Nomination fees make the horse eligible to enter the respective NRHA Futurity and Derby. Other fees apply to enter the NRHA Futurity and Derby. The option must be paid to be eligible in North America and Europe. Payment of Nomination fees are not refundable.

North American Nomination			European Nomination		If Paid Jan 11–31 (LATE)	Comp License	Handling Fee	RUSH FEE	TOTAL
Age	NA Nom	Euro Option	Euro Nom	NA Option					
Yearlings	\$2,000	\$500	\$2,000	\$500	\$2,000 (IF APPLICABLE)	\$60 (IF HORSE IS NOT LICENSED)	\$10	\$50 (IF APPLICABLE)	
2-Year-Olds	\$5,000	\$2,000	\$5,000	\$2,000					
3-Year-Olds	\$7,500	\$3,000	\$6,500	\$4,000					
4-Year-Olds	\$7,500	\$4,000	\$7,500	\$2,000					
5-Year Olds	\$5,000	\$1,000	\$5,000	\$1,000					
6-Year-Olds	\$1,000	\$750	\$2,000	\$500					
7-Year-Olds	\$750	\$500	\$1,000	\$250					
8-Year-Olds (EURO ONLY)		\$250	\$750	(Euro Only)					
\$ _____ +\$ _____		\$ _____ +\$ _____		+\$ _____		+\$ _____	+\$ _____	+\$ _____	=\$ _____

### ALL FIELDS ARE REQUIRED

Foal Name \_\_\_\_\_ Foal Date \_\_\_\_\_  
 Sex \_\_\_\_\_ Country Foaled \_\_\_\_\_  
 Sire \_\_\_\_\_ Dam \_\_\_\_\_  
 Breed \_\_\_\_\_ Owner \_\_\_\_\_ NRHA ID# \_\_\_\_\_  
 Nominator \_\_\_\_\_ NRHA ID# \_\_\_\_\_  Address Change  
 Mailing Address \_\_\_\_\_ City \_\_\_\_\_  
 State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_  
 Phone \_\_\_\_\_ Email \_\_\_\_\_

**You must be a current NRHA member to nominate. If you are not, please select an option below.**

Yes  No Please complete a General Membership (\$115) in my name, if my membership is not current.

*(A General Membership is a non-competing membership)*

### RESPONSIBLE PARTY (Signature Required)

I have read and understand the terms and conditions of the NRHA Nomination program and agree to abide by those terms and conditions as well as the NRHA Rules and Regulations. I have the authority and hereby do, by making this nomination, assume responsibility for and bind owner, nominator, and/or agent to the terms and conditions of this Release and Waiver of Liability. I warrant that I am of legal age and that I have read and understand the foregoing terms and conditions.

Signature \_\_\_\_\_ Printed Name \_\_\_\_\_ Date \_\_\_\_\_

### PAYMENT METHOD

Make checks or money orders payable to: NRHA. Wire transfers must be received by NRHA no later than January 10 and a receipt must accompany nomination forms. Declined and invalid credit cardholders, or those submitting incomplete payment, will be notified via email or by phone. These parties will have three weeks from the date of the notification to resubmit payment in full or the nomination fee will increase to the current age price.

**CIRCLE ONE:** CHECK MONEY ORDER VISA M/C AMEX DISCOVER WIRE TRANSFER

Card # \_\_\_\_\_  
 Exp. Date \_\_\_\_\_ CSV Code \_\_\_\_\_  
 Cardholder Name \_\_\_\_\_  
 Cardholder Signature \_\_\_\_\_  
 Phone \_\_\_\_\_

### INTERNATIONAL BANK WIRE INFORMATION: (EUROPEAN MEMBERS ONLY)

Amount \_\_\_\_\_ Date \_\_\_\_\_

### BANK INFORMATION:

Chase Bank  
 270 Park Ave, New York, NY 10017  
 Account Name: National Reining Horse Association  
 Account Number: 6 2 1 0 1 1 5 1 9  
 Routing Number: 0 2 1 0 0 0 2 1  
 BIC or SWIFT Code: CHASUS33

### SEND NORTH AMERICAN NOMINATIONS TO:

NRHA, Attn Nominations  
 3021 West Reno Avenue, Oklahoma City, OK 73107 • fax: (405) 946-8425 • email: [nominations@nrha.com](mailto:nominations@nrha.com)

Date Received \_\_\_\_\_ Amount Paid \_\_\_\_\_ Check # \_\_\_\_\_ Rev 10/19