

**Arabian English Performance Association (AEPA) 2012 Nomination Form**

**\$100,000 Arabian Saddle Seat Futurity at U.S. Nationals**

Entry /Nomination for the \$100,000 Futurity class is accepted until close of entries for U.S. Nationals. Current Affiliate, Direct or Life AHA Membership is required for participation in all AHA Programs. Horses enrolled in AHA programs MUST be registered with the Arabian Horse Association or the Canadian Arabian Horse Registry. Refer to the current AEPA Terms and Conditions for specific rules, regulations and deadlines. Please print clearly in Blue or Black ink, one horse per enrollment form. PLEASE NOTE THAT YOU WILL TO HAVE TO FILLED OUT U.S. NATIONALS ENTRY FORM AND PAY THEIR FEES TO COMPETE IN THIS CLASS.

**ARABIAN ENTRY INFORMATION**

Horse Name \_\_\_\_\_ Registration # \_\_\_\_\_

Sire \_\_\_\_\_ Dam \_\_\_\_\_

\_\_\_\_\_ \$100,000 AEPA Arabian Saddle Seat Futurity for 4 Year Olds

**OWNER INFORMATION**

Name \_\_\_\_\_

Address \_\_\_\_\_

Email address \_\_\_\_\_

Home # \_\_\_\_\_ Work # \_\_\_\_\_ Fax \_\_\_\_\_

Social Security or Tax ID Number \_\_\_\_\_

**TRAINER INFORMATION**

Name \_\_\_\_\_

Address \_\_\_\_\_

Email address \_\_\_\_\_

Home # \_\_\_\_\_ Work # \_\_\_\_\_ Fax \_\_\_\_\_

In making this application, I hereby subject myself to and agree to be bound by all the provisions of the Articles of Incorporation, Bylaws, Rules and Regulations of the Arabian Horse Association and the AEPA as they now exist or may from time to time be amended, knowledge of which I now have or will immediately acquire.

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

**NOMINATION FEE**

Entry/Nomination fee of \$750 per class must be postmarked by U.S. Close of Entries date and sent to the address below

\_\_\_\_\_ One-Time office fee per horse \$15 \_\_\_\_\_

\_\_\_\_\_ \$750 non-refundable due by close of U.S. entries \$750 \_\_\_\_\_

\_\_\_\_\_ \$500 post entry fee if applicable \$500 \_\_\_\_\_

Method of Payment: U.S. funds only, make checks payable to AEPA, or enter credit card information:

\_\_\_\_\_ Master Card \_\_\_\_\_ Visa # \_\_\_\_\_ Exp. Date \_\_\_\_\_

**Mail nomination(s) to: AEPA, c/o Barbara Chur, 1181 Quaker Road, East Aurora, NY 14052**

**All fees are non-refundable**