

2019 VIRGINIA BRED PROGRAM

Horse Nomination Form

HORSE:

Will participate in RMHA Show Program _____ and/or RMHA Trail Program _____

Name: _____ *Date of Birth _____

Place of Birth (City & County) _____

*RMHA Registration # _____

*Sire _____

*RMHA Registration # _____

*Dam _____

*RMHA Registration # _____

OWNER:

*Name: _____ *RMHA Membership# _____

*Address: _____

Phone: _____ Cell: _____ E-mail: _____

*Required

CERTIFICATION OF NOMINATED HORSE:

Persons who participate in the Virginia Bred Program (VBP) are required to sign this document.

Falsification of information is considered fraud and is punishable by law.

• I certify that I am the owner of the above named horse. • I certify the above named horse was foaled within the Commonwealth of Virginia. • I agree to abide by the rules, bylaws, and regulations of the RMHA while participating in the VBP. • I understand that if I submit inaccurate information regarding the foaling of the above named horse, it may lead to disqualification and forfeiture of any and all awards or monetary grants.

SIGNATURE _____ Date _____

Printed name _____

Completion of the Horse Nomination Form and the owner's Certification of Nominated Horse will entitle the named horse to participate as a Virginia Bred horse in the Virginia Bred Program. Forms must be mailed to Joe Jolley, 586 Breckinridge Mill Rd, Fincastle, VA 24090 by July 31, 2019 along with a \$5 processing fee. Checks should be made out to VRMHBA (Virginia Rocky Mountain Horse Breeders Association).