

**2015 SHOW AND CONTEST HORSE NOMINATIONS**  
**IQHA & IQHYA (January 1, - December 31, 2015)**

**MEMBERSHIP NAME** \_\_\_\_\_  
(Remember: Owner & Exhibitor must also be members of IQHA/IQHYA for points to be counted)

**HORSE NOMINATION - \$10 PER HORSE (COPY OF PAPERS REQUIRED)**

Name of Horse _____	Yr Foaled _____	Sex _____
AQHA # _____	State Foaled _____	Breeder _____
Exact Name of Owner _____		
Exhibitors of this Horse _____	Open _____	Amateur _____ Select _____ Youth _____
Exhibitors of this Horse _____	Open _____	Amateur _____ Select _____ Youth _____
Exhibitors of this Horse _____	Open _____	Amateur _____ Select _____ Youth _____

Name of Horse _____	Yr Foaled _____	Back # _____
AQHA # _____	State Foaled _____	Breeder _____
Exact Name of Owner _____		
Exhibitors of this Horse _____	Open _____	Amateur _____ Select _____ Youth _____
Exhibitors of this Horse _____	Open _____	Amateur _____ Select _____ Youth _____
Exhibitors of this Horse _____	Open _____	Amateur _____ Select _____ Youth _____

Name of Horse _____	Yr Foaled _____	Back # _____
AQHA # _____	State Foaled _____	Breeder _____
Exact Name of Owner _____		
Exhibitors of this Horse _____	Open _____	Amateur _____ Select _____ Youth _____
Exhibitors of this Horse _____	Open _____	Amateur _____ Select _____ Youth _____
Exhibitors of this Horse _____	Open _____	Amateur _____ Select _____ Youth _____

Name of Horse _____	Yr Foaled _____	Back # _____
AQHA # _____	State Foaled _____	Breeder _____
Exact Name of Owner _____		
Exhibitors of this Horse _____	Open _____	Amateur _____ Select _____ Youth _____
Exhibitors of this Horse _____	Open _____	Amateur _____ Select _____ Youth _____
Exhibitors of this Horse _____	Open _____	Amateur _____ Select _____ Youth _____

\_\_\_\_\_ Nominations @ \$10.00 per Horse = \$ \_\_\_\_\_ Enclosed

Make Check Payable To: **IQHA**  
Mail To: **IQHA c/o Claudia Halden 517 S 10<sup>th</sup> Ave., Caldwell, ID 83605**

FOR OFFICE USE ONLY	
POSTMARK DATE _____	CHECK NUMBER _____