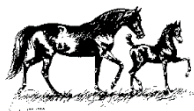


2024 MMHBF NOMINATIONS



Michigan Morgan
Horse Breeders'
Futurity

www.MichiganMorganFuturity.com

| | | |
|----------------|--------|------|
| Owner Name(s)* | | |
| E-mail: | | |
| Farm Name: | Phone: | |
| Address: | | |
| City: | State: | Zip: |

* As listed on registration papers

Postmark by AUGUST 1, 2024

Accepted with late fees after August 1

Mail this form with payment to:

Dianne Ervin, MMHBF Treasurer
3210 Red Fox Ln, Milford, MI 48381
Phone: 248-672-2789
Email: mmhbfNominations@aol.com

| | | | |
|------------------------|--|--|------|
| MEMBERSHIP DUES | Owners must be members of MMHBF to nominate horses. Only nominated horses are eligible to enter "Futurity" labeled classes at the 2024 MMHBF horse show. Please mark a membership category and include your dues on the right. | <input type="checkbox"/> \$30 - Individual Membership | Dues |
| | | <input type="checkbox"/> \$40 - Family Membership | |
| | | <input type="checkbox"/> \$40 - Corporate/Partnership Membership | |

WEANLING NOMINATIONS

| Name of Weanling's SIRE | Reg # | Sire | Dam | Fee (\$50 each) |
|-------------------------|-------|------|-----|-----------------|
| | | | | |
| | | | | |
| | | | | |

| Name of Weanling's DAM | Reg # | Sire | Dam | Fee (\$40 each) |
|------------------------|-------|------|-----|-----------------|
| | | | | |
| | | | | |
| | | | | |

| Name of WEANLING | Date Foaled | Sex | Sire | Dam | Fee (\$40 each) |
|------------------|-------------|-----|------|-----|-----------------|
| | | | | | |
| | | | | | |
| | | | | | |

YEARLING NOMINATIONS

| Name of Yearling | Reg # | Sex | Sire | Dam | Fee (\$40 each) |
|------------------|-------|-----|------|-----|-----------------|
| | | | | | |
| | | | | | |
| | | | | | |

LATE FEES:

50% added after August 1, 2024 until August 19, 2024

100% added after August 19 until 1 hour before the session with the horse's Futurity class.

Page 1 Subtotal (Dues + Fees)

\$

TWO YEAR OLD NOMINATIONS

| Name of 2-Year-Old | Reg # | Sex | Sire | Dam | Fee (\$40 each) |
|--------------------|-------|-----|------|-----|-----------------|
| | | | | | |
| | | | | | |
| | | | | | |

THREE YEAR OLD NOMINATIONS

| Name of 3-Year-Old | Reg # | Sex | Sire | Dam | Fee (\$40 each) |
|--------------------|-------|-----|------|-----|-----------------|
| | | | | | |
| | | | | | |
| | | | | | |

FOUR YEAR OLD NOMINATIONS

| Name of 4-Year-Old | Reg # | Sex | Sire | Dam | Fee (\$40 each) |
|--------------------|-------|-----|------|-----|-----------------|
| | | | | | |
| | | | | | |
| | | | | | |

CLASS SPONSORSHIPS

| | |
|--|-----------------------|
| Qualifier Class @ \$25: First choice class # | Second choice class # |
| Championship @ \$50: First choice class # | Second choice class # |

| | |
|--------------|----|
| Sponsorships | \$ |
|--------------|----|

| | |
|----------------------|----|
| Subtotal from Page 1 | \$ |
|----------------------|----|

| | |
|--------------------|----|
| GRAND TOTAL | \$ |
|--------------------|----|

Please make checks payable to **MMHBF**. There is a \$50 charge for returned checks.

To pay with a credit card, please complete below:

| | | | |
|---|----------------------------|------------------------|-----------------------------|
| Type of Credit Card <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> Discover | Name on card (print) _____ | Account # _____ | Expiration Date _____ |
| | Cardholder Signature _____ | Billing ZIP Code _____ | 3-Digit Security Code _____ |
| | Billing Address _____ | | |
| | | | |