



KENTUCKY MINIATURE HORSE BREEDERS CLUB
YOUTH INCENTIVE PROGRAM
FUNDED BY THE KMHBC

Youth Nomination Form

Name of Youth: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: Home _____ Cell _____ Fax _____

Email: _____

KMHBC Nominated Horse's Registered Name: _____

AMHA Registration No.: _____

Youth AMHyA#: _____

Owner's Name: _____ Youth's relationship to Owner: _____

Owner's Address: _____

City: _____ State: _____ Zip: _____

Owner's Phone: Home _____ Cell _____ Fax _____

Email: _____

Statements of KMHBC Compliance:

- 1. I am a member of AMHA & KMHBC.
2. Youth/horse combination must be nominated by December 1 of the year that the horse is being shown and is good for each year that this youth/horse combination is shown.
3. Attached is a copy of my AMHyA card.
4. The nominated horse must be owned by the youth or their mother, father, brother, sister, aunt, uncle, legal guardian, grandparent, step-parents, step siblings, step grandparents or family-owned corporation, ranch or farm.
5. Attached is a color copy front & back of the AMHA Certificate of Registration for above horse.

By signing below, I acknowledge that I have read and agree to the statements above.

Signature of Youth _____ Date _____

My child has my permission to participate in the KMHBC Youth Incentive Program. Monies earned by the youth will be payable in the name of the youth.

Signature of Parent/Guardian _____ Date _____

No Nomination Fee.

Please note: Color copy front & back of the horse's registration papers and youth's AMHA card must accompany this form. Incomplete forms will not be processed. This form will not be accepted without the signature of the Parent/Guardian.

Please mail completed form to:
Kentucky Miniature Horse Breeders Club
1219 Harry Wise Road
Lawrenceburg, KY 40342

OFFICE USE ONLY
DATE PROCESSED _____
PROCESSED BY _____