



## HALL OF FAME APPLICATION

Nomination submitted by: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Home Phone: ( ) \_\_\_\_\_ Cell Phone: ( ) \_\_\_\_\_

Email Address: \_\_\_\_\_

I would like to nominate to the following category: **Horse** (must be deceased)

### CIRCLE ONLY ONE CATEGORY

BREEDING HORSE – Stallion      Mare

SHOW HORSE – Stallion      Mare      Gelding

HORSES NAME: \_\_\_\_\_

DATE DECEASED: \_\_\_\_\_ REGISTRATION #: \_\_\_\_\_

### OR

**Individual** (may be living) Circle only one.

BREEDER      EXHIBITOR      SERVICE      HUMANITARIAN

Individuals Name: \_\_\_\_\_

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

**Please submit supporting materials and/or letters to the PHBA office prior at least 60 days to the PHBA National Convention for consideration. They will become the property of PHBA and cannot be returned.**