# BYLAW OR RULE CHANGE PROPOSAL FORM


## PALOMINO HORSE BREEDERS OF AMERICA

**15253 E. Skelly Dr., Tulsa, OK 74116-2637*USA*(918)438-1234*Fax (918)438-1232**

**www.palominohba.com**


**USE TO SUBMIT A BYLAW OR RULE CHANGE PROPOSAL (MUST BE POSTMARKED 120 DAYS PRIOR TO CONVENTION FORMS CAN BE MAILED TO THE PHBA OFFICE, EMAILED TO shirley@palominohba.com, OR FAXED TO (918)438-1232**

**A rule or regulation is not subject to amendment by change, addition or repeal until it has been in force for at least two calendar years. Such limitation may be waived by the PHBA Executive Board upon finding extraordinary circumstances: A. Concerns the safety, health or well being of a horse and/or rider; B. Materially benefits PHBA's programs or It's financial stability; or C. Involves other compelling circumstances.**

**The PHBA President will assign proposed bylaw or rule changes to specific committees for their recommendations. Some committees may be asked to review a proposed rule change and report their recommendations to another committee that ultimately reports to the Board of Directors. Committee Chairs will need to coordinate that input. Committees are free to discuss other proposed rule changes but the assigned committee's recommendation is that which will be used during voting at the Board of Directors' meeting.**

Instructions for writing a proposed rule change:

- Define the problem and develop as many positive solutions as possible.
- Determine if any other rules would be affected if your proposal were to be adopted and specify the rule numbers.
- Submit proper wording for a proposed rule change by typing or neatly printing the exact wording being proposed. If you propose changes to existing language, ~~strike through~~ the words you propose to delete. Type in ***bold and italics*** the words you wish to add
- Determine the financial impact (both income and expense) your proposal could have on PHBA.
- You must get signature of three (3) PHBA members who support this proposal.

1. **PROPOSED CHANGE (select one):**

   _____ **ADD NEW RULE**

   _____ **DELETE EXISTING RULE. Reference rule as it appears in the _____ official Handbook.**

   __X__ **CHANGE EXISTING RULE. Reference rule as it appears in the 2026 official Handbook.**

   **Rule Number** 28 **Page Number** 12

2. **PROPOSED EFFECTIVE DATE:** __X__ **January 1, 2028** _____ **Other** _____

3. **Is this proposal changing a rule that was implemented within the last two years?** _____ **YES** __X__ **NO**
   **(Refer to PHBA Rule 33, page 13 of 2026/2027 Handbook)**

4. **If adding a new rule or changing an existing rule, write rule as it should appear in the Handbook: (use attachment if needed)**

   SUMMARY - Delete paragraph B and absorb paragraph A into the main body of Rule 28

   28. In an open meeting, the PHBA Standing Committee(s), while considering the Association's best interest, shall review and discuss the proposed rule changes, deletions and additions before reporting to the Board of Directors and ultimately the Executive Board for a vote. The Show Rules committee shall coordinate all horse show rules. Recommendations may be submitted by related committees to the Show Rules such as but not limited to, Youth and Amateur.



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5. **Justification for change and impact if not passed: (use attachment if needed)**

Prevent potential conflict in interpretations/recommended actions that could result from being addressed by multiple committees

6. **How will this rule change affect PHBA financially if adopted:**

There are no expected adverse effects.

7. **Estimated expense to PHBA if rule change is adopted:**

No costs, other than the administrative costs of creating the change in the rule book

8. **Contact information of person submitting proposed change:**

Name By-Laws & General Rule Committee PHBA ID# _____

Address: _____ City _____

State _____ Zip _____ Phone Number _____

Email _____

Signature _____ Date 11/09/2026

**REFERENCES:**

1. PRINTED NAME Scott Holanda, Chairperson PHBA ID# on file

   SIGNATURE on file

2. PRINTED NAME Cheri Clark, Committee Member PHBA ID# on file

   SIGNATURE on file

3. PRINTED NAME Katey Havens Conner, Committee Member PHBA ID# on file

   SIGNATURE on file

**THIS FORM MUST BE FILLED OUT COMPLETELY. INCOMPLETE SUBMISSIONS WILL NOT BE ACCEPTED; THEY WILL BE RETURNED TO SUBMITTER, NOTING WHAT IS INCOMPLETE. IF TIME ALLOWS BEFORE SUBMISSION DEADLINE, PROPOSAL MAY BE RESUBMITTED WITH CORRECTIONS. NO PROPOSAL WILL BE CONSIDERED IF RECEIVED AFTER DEADLINE.**

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