

AHS INSPECTION TOUR ENROLLMENT FORM
August 11-21, October 3-22, and November 6 & 7, 2011

Note: This form is used to initiate **ALL** 2011 foal registrations, **including foals not attending an inspection site.**
 If not attending an inspection site, please check **"I prefer to register my foal by mail"** below.

Summer (August) entries not postmarked by **Monday, July 25, 2011** will be subject to a \$30.00 late processing fee.
 Fall (October) entries not postmarked by **Monday, September 19, 2011** will be subject to a \$30.00 late processing fee.

INSPECTION SITE _____	DATE _____
or	
I PREFER TO REGISTER MY FOAL BY MAIL <input type="checkbox"/>	

OWNER INFORMATION:	Use a separate form per owner.
Owner's Name _____ Current Member _____ New Member _____	
Address _____	
City _____ State _____ Zip _____	
Telephone (day) _____ FAX _____ E-mail _____	

MARES FOR INSPECTION and/or PERFORMANCE TESTING:

A copy of the mare's registration certificate **must** be enclosed for every mare being enrolled for inspection. Check boxes to indicate whether mare is coming in for Inspection (INS) only, Mare Performance Testing (MPT) only, or both.

Mare's Registered Name	Year Born	Registration Number	Breed	Sire's Name	Dam's Name	Breeder	INS	MPT

STALLIONS FOR AUGUST 14 (HILLTOP) or AUGUST 20 (RAINBOW EQUUS) INSPECTION:

A copy of the stallion's registration certificate **must** be enclosed for every horse being enrolled for inspection. Stallion pedigrees must be pre-approved by the AHS and German Verband.

Stallion's Registered Name	Year Born	Registration Number	Breed	Sire's Name	Dam's Name	Breeder

2011 FOALS and/or 2010 FOALS FOR REGISTRATION:

A COPY OF THE DAM'S REGISTRATION CERTIFICATE **MUST** be enclosed for every foal being enrolled for inspection. A DNA parentage verification kit will automatically be sent for foals out of inspected mares already in the AHS breeding program.

Sex of Foal (Colt/Filly)	Date of Birth	Registered Name of Dam of Foal	Breed of Dam	Registration No. of Dam of Foal	Sire of Foal	Registration No. of Sire

- Please e-mail my inspection receipt/foal kit(s) to the following e-mail address: _____
- I prefer to have my inspection receipt/foal kit(s) mailed to the above address.

Photocopy additional forms as necessary.

PLEASE TURN OVER FOR CALCULATION OF FEES.

Completed forms should be mailed, e-mailed or faxed to:
American Hanoverian Society, 4067 Iron Works Parkway, Suite 1, Lexington, KY 40511-8483
Fax: 859-255-8467 • E-mail: ahsoffice@aol.com

CALCULATION OF FEES FORM

All fees **MUST** be paid in advance at time of enrollment. To calculate fees owed, use the chart below. If you need assistance please contact the AHS office. You will receive a receipt from the AHS upon enrollment, along with other materials and information that you will need for Inspection Day. Should it become necessary to withdraw a horse, there is a \$50.00 withdrawal fee per horse.

CALCULATION OF FEES:

	Price Each	Total Fees
Membership Fees (All membership are calendar year)		
New Active Member (for those who were not a member in 2010)	\$80.00	
Active Renewal (for those who were a member in 2010)	\$95.00	
Upgrade from Associate or Junior Membership	\$25.00 or \$55.00	
Mare Inspection Fees		
_____ Mares (all ages) Number	\$125.00	
_____ Reinspection Number	\$60.00	
_____ Mare Performance Test Number	\$150.00	
Stallion Inspection Fees		
Stallion Initial Inspection	\$500.00	
Stallion Re-Inspection	\$300.00	
Foal Registration Fees		
_____ 2011 Foal Registration (includes DNA Kit) Number	\$185.00	
_____ 2010 Foal Registration (includes DNA Kit) Number	\$235.00	
_____ Mare Dues Not Paid Year Foal Conceived Number	\$40.00	
_____ Mare Dues Not Paid for Year Of Foaling Number	\$40.00	
_____ Foreign Sire Fee (for foal sired by a HV-approved stallion standing abroad) Number	\$150.00	
DNA Kit Fee		
For non-DNA typed mares with AHS offspring to register in 2011		
_____ DNA Kits Number	\$60.00	
Mare Name & Registration #: _____		
Late Fee		
For Summer (August) Enrollment Form postmarked after July 25, 2011 or Fall (October) Enrollment Form postmarked after September 19, 2011	\$30.00	
Transfer of Ownership Fee		
Mares being inspected must be properly transferred.	From Date of Sale \$40 within 6 months \$60 after 6 months & before 12 months \$75 after 12 months & before 24 months \$120 after 24 months	
HV Recording Fee		
For any German-registered mare not previously entered into the AHS database	\$60.00	
Late Branding Fee		
For AHS horses not branded in year of birth for the following horses: Name of Horse: _____ Name of Horse: _____	\$50.00	
Visit the AHS Store at www.hanoverian.org to purchase merchandise, including polo shirts and instructional videos!		
	TOTAL FEES	

ALL ENTRY FORMS MUST BE SIGNED BELOW ON SIGNATURE LINE.

RELEASE AGREEMENT: Every entry at an American Hanoverian Society, Inc. event shall constitute an agreement affirming that the person making said entry and those participating (i.e. owners, handlers, trainers, coaches, grooms, or other attendants) and the horse(s) in said event shall: 1.) be subject to the corporate bylaws and the rules and regulations of the American Hanoverian Society, regardless of membership status; 2.) accept the final decision of the American Hanoverian Society appointed evaluators on any issue and/or question arising from participating in such event; 3.) further agree to hold harmless the American Hanoverian Society, their directors, sponsors, event hosts, agents, employees, and all other personnel for any and all injuries or loss involving persons, horses, or property, whether or not such injury resulted directly or indirectly from the acts or omissions of said evaluators, directors, sponsors, event hosts, agents, employees, or other personnel acting on behalf of the American Hanoverian Society. This agreement may be executed by signatures to FAX or telecopy transmittal documents in lieu of original or machine generated or copied documents.

SIGNATURE OF OWNER _____ **Date** _____

<input type="checkbox"/> Check Enclosed <input type="checkbox"/> I would like to pay via Credit Card: <input type="checkbox"/> MasterCard <input type="checkbox"/> Visa <input type="checkbox"/> Discover	
_____ Cardholders Signature	
Card Number _____ - _____ - _____	Expiration Date ____/____/____
V-Code (last 3 digits in Signature line): _____ Billing Address Zip Code: _____ - _____	