



# CANDIDATE NOMINATION FOR ASHBA BOARD OF DIRECTORS

I would like to propose the following individual for consideration by the Nominating Committee as a nominee for election to the ASHBA Board of Directors:

Name \_\_\_\_\_ Phone Number \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_

Has the Individual agreed to serve as a Director if elected? Yes \_\_\_\_\_ No \_\_\_\_\_  
Has he/she been an ASHBA member for at least the last three years? Yes \_\_\_\_\_ No \_\_\_\_\_  
Is he/she a member of other horse associations? USEF \_\_\_\_\_ UPHA \_\_\_\_\_ AHHS \_\_\_\_\_ RHPA \_\_\_\_\_  
Others: \_\_\_\_\_

**Check the relevant sections below:**

Charter Club Member? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, which one: \_\_\_\_\_  
Charter Club Officer/Director? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, which position: \_\_\_\_\_  
Futurity Officer/Director? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, which position: \_\_\_\_\_  
Member of ASHBA Committee(s)? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, which one(s): \_\_\_\_\_  
Involved with American Saddlebred Youth Club? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, which one: \_\_\_\_\_  
Member of USEF committee(s)? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, which one(s): \_\_\_\_\_  
Member of Horse Show Committees? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, which one: \_\_\_\_\_  
Operate/involved in a breeding program? Yes \_\_\_\_\_ No \_\_\_\_\_  
Operate/involved in a training program? Yes \_\_\_\_\_ No \_\_\_\_\_  
Operate/involved in a riding lesson program? Yes \_\_\_\_\_ No \_\_\_\_\_  
USEF licensed judge? Yes \_\_\_\_\_ No \_\_\_\_\_  
USEF licensed steward? Yes \_\_\_\_\_ No \_\_\_\_\_  
American Saddlebred owner? Yes \_\_\_\_\_ No \_\_\_\_\_  
American Saddlebred breeder? Yes \_\_\_\_\_ No \_\_\_\_\_  
American Saddlebred exhibitor? Yes \_\_\_\_\_ No \_\_\_\_\_  
Fund raising experience? Yes \_\_\_\_\_ No \_\_\_\_\_  
Participant in Prize Programs? Yes \_\_\_\_\_ No \_\_\_\_\_  
Ten or more years' involvement in American Saddlebred activities? Yes \_\_\_\_\_ No \_\_\_\_\_

Please describe history/involvement in the American saddlebred industry, including any volunteer roles:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



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High level of expertise in financial skills? Yes \_\_\_\_\_ No \_\_\_\_\_ If so, please explain: \_\_\_\_\_

High level of expertise in organizational skills? Yes \_\_\_\_\_ No \_\_\_\_\_ If so, please explain: \_\_\_\_\_

High level of expertise in communication skills? Yes \_\_\_\_\_ No \_\_\_\_\_ If so, please explain: \_\_\_\_\_

Please list top areas of expertise and/or experience: \_\_\_\_\_

Experience in innovative programs for Saddlebreds? Yes \_\_\_\_\_ No \_\_\_\_\_

The financial ability, availability and desire to attend Board meetings? Yes \_\_\_\_\_ No \_\_\_\_\_

*(Note: the Board of Directors meets in person at least three times a year. Meetings are normally held in Lexington, KY)*

Professional background/education: \_\_\_\_\_

Specific area(s) of interest if elected to the board: \_\_\_\_\_

"Vision" for the ASHBA?: \_\_\_\_\_

Additional Comments and information: \_\_\_\_\_

**I certify that the above information is correct to the best of my knowledge and I certify that I have spoken with this individual and he/she is willing to be included in the election process for the Board of Directors and is willing to serve as a Director if elected.**

Signature

Print Name

Phone Number

Email Address

Please return the completed signed form to:  
**American Saddlebred Horse & Breeders Association**  
Attn: Nominating Committee  
4083 Wing Commander Way, Suite 50  
Lexington, KY 40511  
Fax to: (859) 259-1628

**QUESTIONS?: (859) 259-2742 . FAX (859) 259-1628 . nominations@saddlebred.com . www.saddlebred.com**