

FOAL ENROLLMENT FORM "OFF LINE"

To enroll a foal you must be a member of IRHBA for the current year..

UP TO THE 2024 BIRTH YEAR

FUTURITY 3 Y.O. NOMINATION for foals sired by non-nominated stallions

Registration Fees Deadline	Amount	Plus 10% (*)
By December 31 of the birth year	€ 300.00	€ 330.00
In the 1st year of age	€ 750.00	€ 825.00
In the 2nd year of age	€ 2,500.00	€ 2,750.00
Million 7 days of the Astronoff Francis.	C F 000 00	

Within 7 days of the 1st go of Futurity € 5,000.00

STARTING FROM THE 2025 BIRTH YEAR

	Sired by Registere	d Stallions	Sired by Non-Registered Stallions			
Registration Fees Deadline	Amount	Plus 10% (*)	Amount	Plus 10% (*)		
July 1 to Dec 31 of the birth year	€ 300.00	€ 330.00	€ 600.00	€ 660.00		
March 1 to Dec 31 of the 1st year of age	€ 750.00	€ 825.00	€ 1,500.00	€ 1,650.00		
March 1 to Dec 31 of the 2nd year of age	€ 2,500.00	€ 2,750.00	€ 3,000.00	€ 3,300.00		
March 1 to Oct 31 of the 3rd year of age	€ 5,000.00		€ 5,300.00			
Dec 1 to Dec 31 of the 3rd year of age	€ 3,500.00		€ 3,800.00			
Jan 1 to Oct 31 of the 4th year of age	€ 3,500.00		€ 3,800.00			
Dec 1 to Dec 31 of the 4th year of age	€ 2,000.00		€ 2,300.00			
Jan 1 to Dec 31 of the 5th year of age	€ 1,500.00		€ 1,800.00			
Jan 1 to Dec 31 of the 6th year of age	€ 1,000.00		€ 1,300.00			
Jan 1 to Dec 31 of the 7th year of age	€ 500.00		€ 800.00			

(*) Is accepted for payment within 60 days from the deadline a surcharge of 10% of the amount due. **It will be the date of the bank transfer.**

As an owner, I request to enter the following foals: (write in block letters)

	Foal name	ID. Aqha/Paint/ Appaloosa	Sex (M/F/G)	Date of L	of birth		Amount
1				/	/		
•	Sirename	Sire ID.	Dam	Name Dam ID.		am ID.	
	Foal name	ID. Aqha/Paint/ Appaloosa	Sex (M/F/G)	Date of birth			Amount
2				/	/		
_	Sirename	Sire ID.	Dam	Name	Dam ID.		
	Foal name	ID. Aqha/Paint/ Appaloosa	Sex (M/F/G)	Date of L	Date of birth		Amount
3				/	/		
	Sirename	Sire ID.	Dam	Name	e Dam ID.		
Offic	ce charge		Foal N.		X € 25	= €	
Possible membership fee for the current year:		€ 70		=€			
(membership fee + office charge)		C 70		- 6			
· · · · · · · · · · · · · · · · · · ·		Total amount $= \epsilon$					

Payment: Bank transfer to IRHBA

IBAN: IT41C 01030 65700 0000 1011 2715 BIC: PASCITM1035 Please attach to this form the copy of the bank transfer and send to:

e-mail: office@irhba.com

IRHBA - Via Repubblica, 6 - 43056 Gainago di Torrile (PR) – Italy

The owner:							
First name*		Last Name*			Company		
	1			1			
Address*	Zip Code*		City*	Provincie		Country	
	1			1			
e-mail*		Phone		Mobile*			
	I						
VAT number		Tax code		_			
					*Mandatory field		
Place, date			Signature				