

CSSSC 2016 STALLION NOMINATION FORM

Stallion Nomination: \$200 by February 1st, 2016 (postmarked)

Supplemental Nomination: \$500 by April 1st, 2016

CAL EXPO OFFICE MAIL PAYMENT TO: CSSSC, PO BOX 254509,
SACRAMENTO CA 95865

REQUIRED INFORMATION

NAME OF STALLION _____ FOAL YEAR _____

USTA REG # _____ SIRE _____ DAM _____

CHECK ONE: FOR BOOKINGS, CONTACT OWNER OR FARM

STANDING LOCATION _____ STUD FEE _____

Farm Address

Farm Contact & Telephone #

STALLION OWNER(S)/LEASEE(S) _____

TAX ID OR SSN _____ CHR LICENSE # _____

OWNER INFORMATION:

_____ Street Address City State Zip

PHONE _____ E-MAIL _____ WEBSITE _____

- I certify under penalty of perjury that the foregoing information is true and correct and I agree that the above-named stallion, as a condition of registration, will stand the entire 2015 breeding season in the State of California. I By signature, I/we agree to comply with all Rules and Regulations governing the California Standardbred Sires Stakes Program.

• PRINT NAME _____

• SIGNATURE _____

OWNERSHIP NOTICE: If the stallion is owned by more than one person or by a partnership or corporation, the following must be provided: all owners' names; a copy of the partnership agreement; or, a corporate resolution designating a corresponding officer or managing officer.

Administrator: csssc@chhaonline.com 916.919.7469 chhaonline.com/sire_stakes

Office Use Only

Pay Date _____ Check# _____ Cash _____ Credit Card _____ Receipt # _____