



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

STARTING FROM THE 2025 BIRTH YEAR

	Sired by Registered Stallions		Sired by Non-Registered Stallions	
Registration Fees Deadline	Amount	Plus 10% (*)	Amount	Plus 10% (*)
Sept 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	€ 1,000.00	€ 1,100.00
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	€ 2,200.00	€ 2,300.00	€ 2,530.00
July 1 to Dec 31 of the 5th year of age	€ 1,500.00	€ 1,650.00	€ 1,800.00	€ 1,980.00
July 1 to Dec 31 of the 6th year of age	€ 1,000.00	€ 1,100.00	€ 1,300.00	€ 1,430.00
July 1 to Dec 31 of the 7th year of age	€ 500.00	€ 550.00	€ 800.00	€ 880.00

(*) 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)

1	Foal name	ID. Aqha/Paint/ Appaloosa	Sex (M/F/G)	Date of birth		Amount
	Sirename	Sire ID.	Dam Name	Dam ID.		
2	Foal name	ID. Aqha/Paint/ Appaloosa	Sex (M/F/G)	Date of birth		Amount
	Sirename	Sire ID.	Dam Name	Dam ID.		
3	Foal name	ID. Aqha/Paint/ Appaloosa	Sex (M/F/G)	Date of birth		Amount
	Sirename	Sire ID.	Dam Name	Dam ID.		

Office charge	Foal N.	X € 25	= €	
Possible membership fee for the current year: (membership fee + office charge)		€ 70	= €	
		Total amount	= €	

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

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*Address**

*Zip Code**

*City**

Provincie

*Country**

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*e-mail**

Phone

*Mobile**

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VAT number

Tax code

*Mandatory field

Place, date

Signature

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