Australian Campdraft Association Inc.

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Sires Progeny Nomination

This form is for the ACA competition year 1st April 2021 to 31st March 2022

- Rule L.1 – Eligible sires for this award may be alive or dead and must be owned by a current financial member. In the event that a sire is deceased, a current member must have owned such sire on the date of death. Only registered progeny (not sires) may earn points in this award.
- Rule L.3 – Sires nominating after **30th April must pay a late nomination fee of $110 (inclu. GST).**

Name of Sire:

Owner:		**ACA No.**
Address:		
Suburb:	**State:**	**Post Code:**

Total nomination fee if paid before 30 April 2021:	**$22.50**
Total nomination **AND** late fee if paid after 30 April 2021:	**$132.50**

Note: Sires Progeny Nomination forms received by the office after **30 April 2021** will incur the above mentioned late fee. In order for your form to be processed efficiently, please retrun them to the ACA Office as soon as possible via email, post or fax.

As an ACA member, it is advised that you read the full terms and conditions for horse registration and sires progeny nomination prior to completing this form. As rules can change periodically, ACA also advises that you refer to the latest copy of the General Information Competition Rules & Guidelines (ACA Rule Book) which is available to download online at www.campdraft.com.au

List progeny below (please see over page for more space to list progeny):

Name of Horse	Owner

ARIAT JUST COUNTRY RIVERINA

Name of Horse	Owner

Select payment method:

Date payment made: Total: $

❑ Credit Card:

Card Number: _ _ _ _ / _ _ _ _ / _ _ _ _ / _ _ _ _

Expiry Date: _ _ / _ _ CVV: _ _ _

❑ Cheque: Cheque Number: Name on Cheque:

❑ Direct Deposit: Reference (name and ACA membership number):

Account Name: Australian Campdraft Association Inc. BSB: 034 171 Account: 171 918

Payments received via bank transfer will be left unallocated if a reference number is not provided to identify the payment.

Office use:

Date Payment Processed: Total: $

Payment Method: Receipt Reference:

Cheque Number: Name on Cheque:

ARIAT JUST COUNTRY RIVERINA