Australian Campdraft Association Inc.



ABN 33 767 694 241

CAMPDRAFTONE

PO Box 18189 CLIFFORD GARDENS QLD 4350 P 07 4622 3110 E aca@campdraft.com.au

Sire Progeny Nomination Form

This form runs in conjunction with the ACA Competition Season, which runs annually from 1 April to 31 March. Sire Progeny Nomination forms need to be received by the ACA Office Team before 1 April. To ensure your Sire Progeny Nomination form is processed efficiently, please return the completed form to the ACA Office Team as soon as possible via email or post.

As an ACA Member, it is advised that you read the full terms & conditions for Horse Registration and Sire Progeny Nomination prior to completing this form. As rules can change periodically, ACA also advise that you refer to the latest copy of the General Information Competition Rules and Guidelines (ACA Rule Book), which can be found on the ACA Website.

Please Note:

Rule M.1: Eligible sires for this award must be owned by a current member and the sire may be alive
or deceased. 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.

SECTION A: ACA Competition Season Information					
Which ACA Competition Season are you nominating for?					
SECTION B: Sire Information					
Name of Sire (If applicable, please include it's breed society registered name):					
Breed Society Registration Number (If applicable):					
SECTION C: Owner Information					
Owner Name:					
Phone Number:	Email Ad	Email Address:			
Address:					
Suburb:	State:		Postcode:		
SECTION D: Nomination Fees					

Total Sires Progeny nomination fee: \$47.00





SECTION D: Payment Information					
Please select your chosen payment method and complete the relevant information below regarding it.					
Date Payment Made: / /	Γotal: \$				
☐ Credit Card Card Number:					
Expiry Date:/ CVV:					
☐ Direct Deposit Reference (Name and ACA Membership Number, if applicable):					
Account Name: Australian Campdraft Association Inc. BSB: 034 171 Account: 171918					
SECTION E: Horse and Owner Information					
Name of Horse	Owner				





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Name of Horse	Owner	

Thank you for deciding to nominate your sire to be part of the Sire Progeny Competition.

SECTION F: Office Use		
Date Payment Processed:	Total: \$	
Payment Method:	Receipt Reference:	