



CANDIDATE NOMINATION FOR ASHA BOARD OF DIRECTORS

I would like to propose the following individual for consideration by the Nominating Committee as a nominee for election to the ASHA Board of Directors:

Name _____ Phone Number _____

Address _____

Email _____

Has the Individual agreed to serve as a Director if elected? Yes _____ No _____
Has he/she been an ASHA member for at least the last three years? Yes _____ No _____
Is he/she a member of other horse associations? USEF _____ UPHA _____ AHHS _____ RHPA _____
Others: _____

Check the relevant sections below:

Charter Club Member? Yes _____ No _____ If yes, which one: _____
Charter Club Officer/Director? Yes _____ No _____ If yes, which position: _____
Futurity Officer/Director? Yes _____ No _____ If yes, which position: _____
Member of ASHA Committee(s)? Yes _____ No _____ If yes, which one(s): _____
Involved with American Saddlebred Youth Club? Yes _____ No _____ If yes, which one: _____
Member of USEF committee(s)? Yes _____ No _____ If yes, which one(s): _____
Member of Horse Show Committees? Yes _____ No _____ If yes, which one: _____
Operate/involved in a breeding program? Yes _____ No _____
Operate/involved in a training program? Yes _____ No _____
Operate/involved in a riding lesson program? Yes _____ No _____
USEF licensed judge? Yes _____ No _____
USEF licensed steward? Yes _____ No _____
American Saddlebred owner? Yes _____ No _____
American Saddlebred breeder? Yes _____ No _____
American Saddlebred exhibitor? Yes _____ No _____
Fund raising experience? Yes _____ No _____
Participant in Prize Programs? Yes _____ No _____
Ten or more years' involvement in American Saddlebred activities? Yes _____ No _____

Please describe history/involvement in the American saddlebred industry, including any volunteer roles:



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High level of expertise in financial skills? Yes _____ No _____ If so, please explain: _____

High level of expertise in organizational skills? Yes _____ No _____ If so, please explain: _____

High level of expertise in communication skills? Yes _____ No _____ If so, please explain: _____

Please list top areas of expertise and/or experience: _____

Experience in innovative programs for Saddlebreds? Yes _____ No _____

The financial ability, availability and desire to attend Board meetings? Yes _____ No _____

(Note: the Board of Directors meets in person at least three times a year. Meetings are normally held in Lexington, KY)

Professional background/education: _____

Specific area(s) of interest if elected to the board: _____

“Vision” for the ASHA?: _____

Additional Comments and information: _____

I certify that the above information is correct to the best of my knowledge and I certify that I have spoken with this individual and he/she is willing to be included in the election process for the Board of Directors and is willing to serve as a Director if elected.

Signature

Print Name

Phone Number

Email Address

Please return the completed signed form to:
American Saddlebred Horse Association
Attn: Nominating Committee
4083 Iron Works Parkway | Lexington, KY 40511
Fax to: (859) 259-1628

Should you have any questions, please feel free to contact a member of the Nominating Committee as follows:

Joan Lurie, Chair (W8073@aol.com), **Betsy Boone** (boonescabin@aol.com), **James Nichols** (jlnichols12@yahoo.com),
Marty Schaffel (marty@martinschaffel.com), **Judy Werner** (redwingfarm.werner@gmail.com)

QUESTIONS?: (859) 259-2742 . FAX (859) 259-1628 . saddlebred@asha.net . www.saddlebred.com