



2015 AjPHA Regional Club Director Nomination

APHA and AjPHA Regional Clubs may submit this form to nominate eligible youth for AjPHA National Director. Nominees must be 17 or younger as of January 1, 2015.

State/Province/Country: _____ Club Submitting Nomination: _____

Club Advisor: _____ Advisor's E-mail: _____

Address: _____

City: _____ State/Province: _____ Zip: _____

Phone: _____

Signature of Person Submitting Nomination: _____

List nominees from club. Attach additional sheets as necessary.

1. Name: _____

AjPHAIDNumber: _____

Address: _____

City: _____

State/Province: _____ Zip: _____

Phone: _____

E-mail: _____

Birth date: _____/_____/_____

4. Name: _____

AjPHAIDNumber: _____

Address: _____

City: _____

State/Province: _____ Zip: _____

Phone: _____

E-mail: _____

Birth date: _____/_____/_____

2. Name: _____

AjPHAIDNumber: _____

Address: _____

City: _____

State/Province: _____ Zip: _____

Phone: _____

E-mail: _____

Birth date: _____/_____/_____

5. Name: _____

AjPHAIDNumber: _____

Address: _____

City: _____

State/Province: _____ Zip: _____

Phone: _____

E-mail: _____

Birth date: _____/_____/_____

3. Name: _____

AjPHAIDNumber: _____

Address: _____

City: _____

State/Province: _____ Zip: _____

Phone: _____

E-mail: _____

Birth date: _____/_____/_____

**Postmark to Director of Youth Activities by
December 1, 2014.**



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