



Members Endorsement for National Director

Please use the following form when submitting individual recommendations. Be sure to include nominee's telephone number. Mail the completed form to APHA, Directors Nominating Committee, attention Theresa Brown, P.O. Box 961023, Fort Worth, Texas 76161-0023 or send by email to tbrown@apha.com. Faxes will be accepted at 817/222-8470. All nominees will need to submit a resume before their nomination can be considered. Please submit at <https://americanpainthorseassoc.formstack.com/forms/aphadirectorscbio>.

NOTE: ALL RECOMMENDATIONS MUST BE POSTMARKED NO LATER THAN August 15, 2016.

Area: _____

Name of Nominee: _____

Address: _____

City/State/Zip: _____

Daytime Telephone Number: _____ APHA ID Number: _____

Article III, Sec. 1.F. 1. of the APHA's 2016 Official Rule Book states in part, "Recommendations for nominations from Regional Clubs will be received by the Directors Nominating Committee. In addition, an individual may recommend him/herself for nomination upon submission of the signatures of five APHA current members in good standing and residing in the same Representative Area evidencing endorsement of the recommendation."

Please use the space below for the signatures and membership numbers of those endorsing the director nominee. One or more signatures may appear on this form. This form may be copied to provide for additional recommendations.

1. _____ APHA ID No. _____ Telephone No: _____

2. _____ APHA ID No. _____ Telephone No: _____

3. _____ APHA ID No. _____ Telephone No: _____

4. _____ APHA ID No. _____ Telephone No: _____

5. _____ APHA ID No. _____ Telephone No: _____