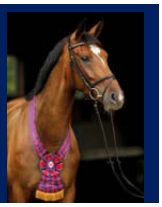
THE OLDENBURG HORSE BREEDERS' SOCIETY

A Division of the Oldenburger Pferdezuchtverband e.V

www.oldenburghorse.net



Application for

OHBS/GOV IBC Award

The Oldenburg Horse Breeders' Society (OHBS) offers High Score neck sashes to qualified winners of OHBS/GOV Individual Breed Classes at recognized USDF DSHB competitions.

Requirements

- The IBC must be for OHBS/GOV horses only. The class cannot include horses from any other registry (including ISR/ONA).
- All horses competing in the IBC must hold registration papers from The Oldenburg Horse Breeders' Society or its parent registry, Verband der Züchter des Oldenburger Pferdes (i.e., the German Oldenburg Verband). In the case of current year foals that have not yet received registration papers, the foal's owner must express intent to register the foal with OHBS/GOV.
- Show Managers must confirm eligibility for each horse entered in the class by inspecting the horse's registration papers before the class begins to verify the issuing organization. (This requirement is waived for foals of current year that do not yet have registration papers).
- Show Managers must provide the following information to the Awards Coordinator within 5 business days after the competition ends:
    - name of winning horse, age, sex, names of sire/dam/damsire, name of breeder
    - owner's name, address, phone number, and email address
    - number of entries in the OHBS/GOV IBC

To order a high score neck sash for your OHBS IBC, please complete the following form. **Note:** You may fill out this form online (requires Acrobat Reader 7 or higher). You can then save the completed form to your computer, and email it to the OHBS Awards Coordinator shown below, OR you can print out the completed form and fax it to the Awards Coordinator. A third alternative is to print the blank form and fill it out by hand before faxing (be sure to PRINT CLEARLY).

PLEASE SUBMIT A SEPARATE APPLICATION FOR EACH SHOW!

Date of Competition _____ Deadline for Receipt of Award _____

Name of Competition _____ Location of Competition (facility/city/state) _____

Contact Name (Competition Manager or Awards Chair) _____ Phone Number _____ Email Address _____

Name/address to ship awards to _____

Comments _____

Send completed form at least TWO WEEKS before your competition
to OHBS/GOV Show Awards Coordinator Sharon Downes
Email: gov.ohbs.sharondownes@gmail.com
Phone: 561-797-8063