

## REGION REPRESENTATIVE NOMINATION FORM

Date:		
Name:		
Address:	City:	
State/Province:	Zip/Postal Code:	
Telehone:	Email:	
Region:	Years as a GVHS Member:	# of GVHS registered horses:

Why I would like to be the GVHS representative to my region (include any qualifications/education/experience etc. that make you a great representative for the members/owners in your region and for the GVHS):