



**ARABIAN HORSE ASSOCIATION<sup>SM</sup>**  
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 www.ArabianHorses.org sweepstakes@ArabianHorses.org

AHA 2112A (11/18)



## Last Chance Buy-In For Sweepstakes Original Entry Deferred Billing Agreement

Please print clearly.

**PLEASE READ ENTIRE FORM CAREFULLY BEFORE FILLING OUT**

- Must be a current member in good standing with AHA. Enclose 1<sup>st</sup> payment and attach all completed Last Chance Buy-In For Sweepstakes Original Entry Enrollment Application(s). The horse(s) must be registered and the Last Chance Buy-In For Sweepstakes Deferred Billing Agreement (LC Deferred Billing Agreement) must be completed and signed by the current recorded owner(s).
- Payment Options (all payments will be set up for quarterly payments, billed on the 15<sup>th</sup> of the month)

**Entry Totals (Not including Admin. Fee)**  
 Up to \$2,500  
 \$2,501 and up

**Term Options**  
 4 payments  
 Choice of 4 or 8 payments

**Please state # of Payments requested based on total dollar amount of all entries \_\_\_\_\_.**  
**IF TERMS ARE NOT SELECTED "4 PAYMENTS" WILL BE ASSIGNED**

- Refer to Chapter 15 for complete information and requirements for the Arabian Breeders Sweepstakes Program. If payment is not made in accordance with terms of this LC Deferred Billing Agreement, all payments paid and prize money earned to date shall be forfeited and the entry(ies) dropped from the Sweepstakes Program.
- Prize money earned at the Regional and National level by entries that are placed on the LC Deferred Billing Agreement will be applied to the outstanding balance of the LC Deferred Billing Agreement. Prize money earned by an Original Entry will be applied to the last payment first. For example, if the LC Deferred Billing is set up for 4 quarterly payments. The first payment was made at the time of enrolling into the program. A horse earns \$1,000 in prize money. The \$1,000 will be applied in reverse order to the 4<sup>th</sup> payment first and then the 3<sup>rd</sup> payment and so on until paid in full. If prize money is earned in excess of the outstanding balance of the LC Deferred Billing Agreement payments, a check will be issued for the difference.

**CALCULATION OF PAYMENTS**

Total from all completed entry forms excluding any late fees		\$ _____	(A)	
Admin Fee: 10 % of total entries <b>(Required)</b>	(A) X 10%	\$ _____	(B)	
Subtotal	(A) + (B)	\$ _____	(C)	
Divide (C) by # of payments Selected in # 3.		\$ _____	(D)	
<b>TOTAL 1<sup>st</sup> PMT. DUE AT TIME OF ENTRY</b>		<b>\$ _____</b>		

Remaining payments, as calculated in (D), will be billed on a quarterly basis with the first invoice being billed on the 15<sup>th</sup> of the month approximately 3 months from the date of receipt of entry. You will receive statements indicating amount due. **If payment is not received within 60 days of billing date the entry will be dropped from the program and all monies paid and any prize money earned will be forfeited. Hereby the applicant(s) is not entitled to submit another entry on a Deferred Billing Agreement for 5 (five) years.**

In consideration of Arabian Breeders Sweepstakes accepting this LC Deferred Billing Agreement, I hereby acknowledge that I have read, understand and agree to the terms set forth above. In making this application, I declare that I am a current AHA member, and I hereby subject myself to and agree to be bound by all the provisions of the Articles of Incorporation, Bylaws, Rules and Regulations of the Arabian Horse Association as they now exist or may periodically be amended of which I now have or will immediately acquire.  
**(Please print clearly.)**

AHA Membership # \_\_\_\_\_ Name \_\_\_\_\_  
 Address \_\_\_\_\_ E-Mail \_\_\_\_\_  
 City \_\_\_\_\_ State/Prov. \_\_\_\_\_ Zip/Postal \_\_\_\_\_  
 Home # \_\_\_\_\_ Work # \_\_\_\_\_ Fax # \_\_\_\_\_

**If entry is owned by more than one person, both signatures are required.**

Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Signature \_\_\_\_\_ Date \_\_\_\_\_

**For office use only**

First Payment Date: \_\_\_\_\_ Next Payment Date: \_\_\_\_\_

INVOICE # \_\_\_\_\_ Entry ID # \_\_\_\_\_