



Triple Crown 100  
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## Young Crowns Enrollment Form

For stallions with no performance age progeny. \$500 enrollment fee & one donated breeding.

Stallion Registered Name \_\_\_\_\_ Breed \_\_\_\_\_ Year \_\_\_\_\_

Registration # \_\_\_\_\_ Color \_\_\_\_\_ Height \_\_\_\_\_

Owner \_\_\_\_\_ SS# (required for payout) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Standing At \_\_\_\_\_ Contact Name \_\_\_\_\_

Phone \_\_\_\_\_ Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Email \_\_\_\_\_ Website \_\_\_\_\_

Stud Fee \_\_\_\_\_ Cooled Semen \_\_\_\_\_ Frozen \_\_\_\_\_ On Site AI \_\_\_\_\_ Live \_\_\_\_\_

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

New Enrollment \_\_\_\_\_ Fee \$500 \_\_\_\_\_ Renewal \_\_\_\_\_ Fee \$500 \_\_\_\_\_ (Renewel must meet qualifications)

Copy of registration papers, certificate for donated breeding and payment must be recieved with application. By signing this enrollment form, stallion owner agrees to abide by all rules of the Triple Crown 100 Program.

Paid: Check# \_\_\_\_\_ CC \_\_\_\_\_

Visa \_\_\_\_\_ MC \_\_\_\_\_ Discover \_\_\_\_\_ AmEx \_\_\_\_\_ (There will be a 5% credit card fee.)

Name On Card \_\_\_\_\_ Card # \_\_\_\_\_ Exp \_\_\_\_\_ Code \_\_\_\_\_

Billing Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Signature \_\_\_\_\_ Amount \$ \_\_\_\_\_ + 5% \_\_\_\_\_ Total \$ \_\_\_\_\_

Mail to: Triple Crown 100 - P.O. Box 1762, Milledgeville, GA 31059  
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