Stallion Lease Declaration

2026
BREEDING YEAR

SEPARATE FORMS ARE REQUIRED FOR EACH STALLION

Ontario Racing - Attention: TIP Coordinator

Completed forms 400 - 10 Carlson Court, Etobicoke, ON, Canada M9W 6L2 should be sent to: Phone: (416) 675-3993 ext. 2633 Fax: (416) 477-5499

Email: tbprogram@ontarioracing.com

This declaration may be submitted in lieu of a copy of the actual lease for any leased stallion that is registered as an ONTARIO SIRE in the Thoroughbred Improvement Program. The term of the lease must include the stallion standing his entire Northern Hemisphere Stud Season in Ontario. In order to register a stallion as an Ontario Sire, you must submit the current year's *Thoroughbred Stallion Registration* form.

FOR OFFICE USE ONLY:
Date Received:
Date Entered:
Processed By:

STALLION INFORMATION					
Stallion Registered Name:		Year of Birth: (yyyy)	The Jockey Club Number:		
Lease Term (Number of Years): Date on which lease became		e effective: (dd/mm/yyyy)	Will this stallion stand in the Southern Hemisphere during his lease term?		
LESSEE INFORMATION					
Lessee Name:					
Address:					
City/Town:		Province/State:	Postal Code		
Phone:		Email:			
OWNER INFORMATION					
Owner Name:					
Address:					
City/Town:		Province/State:	Postal Code		
Phone:		Email:	nail:		
MANDATORY DECLARATIONS					
I certify that the term of the lease includes this stallion standing his entire NORTHERN HEMISPHERE STUD SEASON in Ontario.					
• I, the undersigned, certify that I have full power and authority to execute and file this declaration and that each person or entity having ownership interest in this horse has full knowledge of the filing of this document. I further certify that each person or entity having ownership interest in this horse has authorized me to complete and file this declaration form and that I have full power and authority to receive any requested or related documents from Ontario Racing. I agree to comply with the <i>Horse Racing Licence Act, 2015</i> , and the <i>Rules of Thoroughbred Racing</i> of the Alcohol and Gaming Commission of Ontario (AGCO).					
 I further certify that I have read and understand the conditions of stallion eligibility as published by Ontario Racing and certify that this stallion meets these eligibility requirements and that the information stated on this form is true and correct. I hereby assume full responsibility for the information provided. 					
 I understand that the Program Administrator may share my contact information (including by electronic means) for the purpose of administering the Ontario Horse Improvement Program and the Thoroughbred Improvement Program. 					
NOTE: The Program Administrator reserves the right to amend, cancel or alter the Program and/or make changes to the terms, conditions, and benefits of any nature and kind whatsoever and, the signatories of this form hereby agree to be bound by such changes.					
SIGNATURE: X		_	I am the: ☐ Owner/Member of the Ownership Group, OR		
Date:		☐ Lesse	☐ Lessee/Member of the Lessee Group, OR		
AGCO Licence #		Autho	☐ Authorized Agent		
Fither the Course (Leaves) as the Leaves must have a course to said ACCC lieuwe. Keep Authoris 1. A					
Either the Owner (Lessor) or the Lessee must have a current, valid AGCO licence. If an Authorized Agent is signing on behalf of an Owner/Lessee, they must be an Ontario Resident, hold a current, valid AGCO licence, and the <i>Appointment of</i>					

YOU MUST COMPLETE AND SIGN ALL DECLARATIONS ON THIS FORM

Authorized Agent form must be on file with the Program Administrator.