THOROUGHBRED IMPROVEMENT PROGRAM

ONTARIO RESIDENT MARE DECLARATION FORM

FOALING YEAR: _____

MARE INFORMATION

Mare Registered Name:	The Jockey Club Registration Number:	Year of Birth (yyyy):

BREEDER INFORMATION

Breeder of Record: (Owner of mare at time of foaling)	AGCO Licence #

Address:		
Town/City:	Province/State:	Postal/ZIP Code:
Phone:	Email:	

FARM INFORMATION WHERE MARE COMPLETED HER RESIDENCY

Farm Name:	Contact Person:	
911 Farm Address: (If no street address, please give county, township, lot and concession number)		
Town/City:	Province: **ONTARIO**	Postal Code:
Phone:	Email:	

FARM INFORMATION WHERE MARE FOALED (IF DIFFERENT FROM ABOVE)

Farm Name	Contact Person:	
911 Farm Address: (If no street address, please give county, township, lot and concession number)		
Town/City	Province: **ONTARIO**	Postal Code:
Phone:	Email:	

FOALING INFORMATION AND RESIDENCY REQUIREMENTS

Mare Registered Name:	Date of Foaling (MM/DD):

To be eligible as an ONTARIO RESIDENT MARE for the above listed foaling year, the mare must meet one of the five conditions listed below. Please indicate which condition applies to this mare.

This mare has foaled in Ontario in the above listed foaling year and complies with one of the following criteria:

☐ Criteria 1 The mare was in Ontario on **December 1** prior to foaling date and remained in Ontario until foaling.	☐ Mare is permanent resident of Ontario (check box) OR Arrival Date in Ontario _____	The Program Administrator may request transportation and/or border crossing documents to validate entry date.
☐ Criteria 2 The mare was resident in Ontario **for 60 consecutive days** surrounding foaling in Ontario.	Start Date of Residency: _____ End Date of Residency: _____	The Program Administrator may request transportation documents and/or copies of records for the mare such as invoices for veterinarian services, farrier (blacksmith) services, or boarding services during the declared residency period, to verify the mare's residency period.
☐ Criteria 3 The mare foaled in Ontario and was bred back to an ONTARIO SIRE	Name of ONTARIO SIRE that mare was bred back to: _____ The last date bred as would be reported on a Report of Mares Bred filed with The Jockey Club: _____	
☐ Criteria 4 The mare was purchased, or RNA (Reserve Not Attained) at a recognized public auction and arrived within the boundaries of Ontario no later than thirty (30) days after the date of purchase (or RNA) at sale.	Name of sale: _____ Date of sale: _____ Sale HIP # for mare _____ Date of mare's arrival in Ontario _____	Either a copy of the mare's registration papers must be submitted with this form as proof of ownership, OR a copy of the Purchase/transaction receipt, clearly indicating the date of the transaction. The purchase price may be blacked-out on the document. The Program Administrator may request Transportation and/or border crossing documents to validate the entry date.
☐ Criteria 5 The mare was purchased in a bona-fid private sale, arrived in Ontario within 30 days of the date of transaction and remained in Ontario until foaling.	Date of sale/purchase: _____ Arrival Date: _____	Either a copy of the mare's registration papers must be submitted with this form as proof of ownership, OR a copy of the purchase/transaction receipt, clearly indicating the date of the transaction. The purchase price may be blacked-out on the document. The Program Administrator may request Transportation and/or border crossing documents to validate the entry date.

COMPLETE AND SIGN ALL DECLARATIONS ON BOTH SIDES OF THIS FORM

THOROUGHBRED IMPROVEMENT PROGRAM

ONTARIO RESIDENT MARE DECLARATION FORM

MANDATORY DECLARATIONS: YOUR SIGNATURE BELOW CONSTITUTES YOUR AGREEMENT TO ALL CONDITIONS

I declare that the information concerning the principal residence of this mare is correct and that this mare shall be made available for inspection by representatives of the Program at any time.

- I further understand that if the declared location of the residency is in question, the onus will be on the Breeder to provide further documentation to verify eligibility as an ONTARIO RESIDENT MARE.
- I understand that should I fail to provide documentation as requested, the mare may be ineligible for ONTARIO RESIDENT MARE status, and its offspring may not qualify as REGISTERED ONTARIO BRED.
- I understand that the Program Administrator may share my contact information (including by electronic means) for the purpose of marketing and administering the Ontario Horse Improvement Program and the Thoroughbred Improvement Program.

I, the undersigned, certify that I have full power and authority to execute and file this application and that each person or entity having ownership interest in this mare has full knowledge of the filing of this document. I further certify that each person or entity having ownership interest in this mare has authorized me to complete and file this application 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 *Horse Racing Licence Act, 2015*, and the *Rules of Thoroughbred Racing* of the Alcohol and Gaming Commission of Ontario (AGCO). I further certify that I have read and understand the conditions of mare eligibility as published by Ontario Racing and certify that this mare meets these eligibility requirements and that the information stated on both sides of this form is true and correct. I hereby assume full responsibility for the information provided.

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.

BREEDER NAME: _____

BREEDER SIGNATURE: _____

Date: _____

AGCO Licence #: _____

If the Breeder is a Stable, Partnership, Syndicate or Corporation, signature of a member of the Stable, Partnership, Syndicate or Corporation is required. Indicate which of the above the breeder is below.

☐ Stable ☐ Partnership ☐ Syndicate ☐ Corporation

An **AUTHORIZED AGENT** may sign on behalf of the Breeder if the AUTHORIZED AGENT and the breeder hold a valid, current AGCO licence, and the appropriate AUTHORIZED AGENT documents are on file with Ontario Racing Management,

AUTHORIZED AGENT NAME: _____

AUTHORIZED AGENT SIGNATURE: _____

Phone: _____

Date: _____

AGCO Licence #: _____

FORM SUBMISSION INFORMATION

Enroll within one year of Date of Foaling: NO FEE

After one-year deadline: $50 LATE FEE

Date of Foaling: _____

Date of Enrollment: _____

☐ $50 Late Fee is enclosed if enrolling after deadline.

Late fee does not apply to foals born in 2022 or prior.

Make cheques payable to ***"Thoroughbred Improvement Program"***, and mail with completed form, and please send completed forms to:

Ontario Racing
Thoroughbred Improvement Program
P.O. Box 160
Campbellville, ON L0P 1B0

Phone: (647) 385-8127
Fax: (416) 477-5499
Email: tbprogram@ontarioracing.com
tip.ontarioracing.com