



2009 ONTARIO RESIDENT MARE DECLARATION FORM

2009
TBMR0901

MARE INFORMATION

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

Name of farm where mare completes her Ontario Residency in 2009:	Contact Person:
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911 Farm Address: (If no street address, please give county, township, lot and concession number):

City / Town: **Ontario** Postal Code

Phone:	Email:
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BREEDER INFORMATION

Breeder of Record (Owner of mare at time of foaling):	ORC Licence Number:
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Address: Same As Above

City/Town: State/Province Postal/Zip Code

Phone:	Email:
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MANDATORY DECLARATIONS- YOUR SIGNATURE BELOW RECOGNIZES 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 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 the Ontario Racing Commission. I agree to comply with the Racing Commission Act, 2000, and the Rules of Thoroughbred Racing of the Ontario Racing Commission. I further certify that I have read and understand the conditions of mare eligibility as published by the Ontario Racing Commission 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.

PLEASE PRINT YOUR NAME CLEARLY IN THIS BOX, AND SIGN IN THE APPROPRIATE AREA BELOW:

BREEDER SIGNATURE: _____ ORC Licence: _____ Date: _____	An Authorized Agent may sign on behalf of the Breeder if the Authorized Agent holds a valid, current ORC licence, and the appropriate Authorized Agent documents are on file with the Canadian Thoroughbred Horse Society (CTHS).
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If the Breeder is a Stable, Partnership, Syndicate or Corporation, signature of a member of the Stable, Partnership, Syndicate or Corporation is required.

BREEDER SIGNATURE: _____ ORC Licence: _____ Date: _____	AUTHORIZED AGENT SIGNATURE: _____ Phone: _____ ORC Licence: _____ Date: _____
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Email Address (Of person signing the form): Same As Above

YOU MUST COMPLETE AND SIGN ALL DECLARATIONS ON BOTH SIDES OF THIS FORM



MARE INFORMATION

Mare Registered Name:

Date of Foaling in 2009 (mm/dd):

To be eligible as an ONTARIO RESIDENT MARE for the 2009 foal year, the mare must meet one of the five conditions listed below. Please indicate which condition applies to this mare.

This mare will foal (or has foaled) in Ontario in 2009 and complies with the following criteria...

<input type="checkbox"/> Criteria 1: The mare arrived in Ontario by October 1st 2008 and remained in Ontario until foaling.	<ul style="list-style-type: none"> Date of mare's arrival in Ontario: _____ 	<p>The <i>Program Administrator</i> may request transportation and/or border crossing documents to validate entry date.</p>
<input type="checkbox"/> Criteria 2: The mare was resident in Ontario for 150 consecutive days surrounding foaling in Ontario.	<ul style="list-style-type: none"> If the mare is a permanent resident of Ontario, please check here <input type="checkbox"/> OR Date that the mare began her residency period in Ontario : _____ 	<p>The <i>Program Administrator</i> 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.</p>
<input type="checkbox"/> Criteria 3: The mare foaled in Ontario and was bred back to an ONTARIO SIRE.	<ul style="list-style-type: none"> Name of ONTARIO SIRE that mare was bred back to : _____ The last date bred as would be reported on a <i>Report of Mares Bred</i> filed with The Jockey Club: _____ 	
<input type="checkbox"/> Criteria 4: The mare was purchased, or RNA (Reserve Not Attained) at a CTHS-recognized sale or auction, and arrived within the boundaries of Ontario no later than thirty (30) days after the date of purchase (or RNA) at sale.	<ul style="list-style-type: none"> Name of sale _____ Date of sale _____ Sale hip number for mare _____ Date of mare's arrival in Ontario _____ 	<p>The <i>Program Administrator</i> may request transportation and/or border crossing documents to validate entry date.</p>
<input type="checkbox"/> Criteria 5: The mare was purchased in a bona-fide private sale, arrived in Ontario within 30 days of the date of transaction and remained in Ontario until foaling.	<ul style="list-style-type: none"> Date of sale/purchase: _____ Date of mare's arrival in Ontario: _____ 	<p>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. <i>The purchase price may be blacked-out on the document.</i></p> <p>The <i>Program Administrator</i> may request transportation and/or border crossing documents to validate the entry date.</p>

PRIVACY AND CONSENT:

I give the *Program Administrator* permission to share my contact information (including by electronic means) for the purpose of marketing the *Ontario Horse Improvement Program* and the *Thoroughbred Improvement Program*.

YES NO

Signature: _____

FOR PROGRAM INFORMATION AND SUBMISSION OF COMPLETED FORMS:

TO CONTACT THE ORC:

CTHS (Ontario Division)
P.O. Box 172,
Rexdale, Ontario M9W 5L1
Phone: (416) 675-3602
Fax: (416) 675-9405
Email: cthson@idirect.com

Ontario Racing Commission
Attention: Thoroughbred Improvement Program
10 Carlson Court, Suite 400 Toronto, Ontario M9W 6L2
Phone: (416) 213-0520
Fax: (416) 213-7827
Email: inquiry@ontarioracingcommission.ca