



A mare must be enrolled with the Program each year, in order to qualify as an **ONTARIO RESIDENT MARE**. There is an annual fee of \$50 per mare to enrol a mare as an **ONTARIO RESIDENT MARE**. For the 2011 Foal Year, this registration form and all fees must be submitted after conception and prior to the Recipient Mare foaling out in Ontario.

Completed forms (with all required payments) should be sent to:

Standardbred Canada  
1-2150 Meadowvale Blvd.,  
Mississauga, ON L5N 6R6

For information on the Ontario Resident Mare Program, contact:

Standardbred Canada  
Attention: Ontario Resident Mare Program  
Phone: 905-858-3060 Fax: 905-858-3111  
Email: ontariomare@standardbredcanada.ca

**FOR OFFICE USE ONLY:**

Date Received: \_\_\_\_\_

Date Entered: \_\_\_\_\_

Processed By: \_\_\_\_\_

Reference #: \_\_\_\_\_

**Make cheques payable to: Standardbred Canada**

**Note:** Any Owner, Lessee or Authorized Agent signing this application must hold a current valid ORC licence. An Authorized Agent may sign on behalf of an Owner or Lessee, **IF:**

- The Owner **or** Lessee holds a valid, current ORC licence, **AND**
- The Authorized Agent holds a valid current ORC licence, **AND**
- The appropriate **Authorized Agent** documents are recorded on file with Standardbred Canada.

To qualify as an Ontario Resident Mare for the 2011 foal year:

- The *Embryo Transfer Donor Mare* (dam of the foal) must be enrolled with the Program after conception and prior to the *Recipient Mare* foaling out in Ontario.
- The embryo transfer procedure must have occurred in Ontario.
- The *Recipient Mare* must complete the 180-day residency requirement and remain in the Province of Ontario through foaling in Ontario.

**The residency period for the Recipient Mare commences the day this form is received.**

**EMBRYO TRANSFER DONOR MARE INFORMATION**

Registered Name of Donor Mare:	Tattoo/Freeze Brand Number:	Year of Birth: (yyyy)
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Anticipated 2011 Foaling Date: (dd/mm/yyyy)

**FARM INFORMATION WHERE THE RECIPIENT MARE WILL COMPLETE HER RESIDENCY**

Name of farm (optional) where the **Recipient Mare** will reside for the 2011 foaling season:

Farm Manager or Contact Person:	ORC Licence # (if applicable)
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911 Farm Address: (If no street Address, please give county, township, lot and concession number):

City /Town:	<b>Ontario</b>	Postal Code:
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Phone:	Cell:
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Fax:	Email of farm where mare is resident:
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**If the location of the mare changes during the residency period, Standardbred Canada must be notified through submission of the *Resident Mare Change of Location* form.**

## MANDATORY DECLARATIONS

I declare that the information concerning the principal residence of the Recipient Mare recorded on this application form is correct and that this mare shall be made available for inspection by representatives of the Program Administrator at any time.

- I further understand that if the declared location of the residency is in question, the onus will be on the owner/lessee of the Donor Mare to provide further documentation to verify eligibility for the *Standardbred Improvement Program*.
- I understand that should I fail to provide documentation as requested, the Donor Mare may be ineligible for ONTARIO RESIDENT MARE status.
- 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 *Standardbred 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 Standardbred Racing of the Ontario Racing Commission.

I further certify that I have read and understand the conditions of mare eligibility as most recently published by the Ontario Racing Commission and certify that this mare meets the eligibility requirements and that the information stated on 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 BELOW:

SIGNATURE: X \_\_\_\_\_

DATE: \_\_\_\_\_

ORC Licence #: \_\_\_\_\_

I am:

- An Owner or the Corresponding Officer of the Ownership Group
- A Lessee or the Corresponding Officer of the Lessee Group
- The Authorized Agent

**A copy of the appropriate authorized agent and/or lease documents must be on file with Standardbred Canada.**

## 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 *Standardbred Improvement Program*.

YES       NO

Signature: X \_\_\_\_\_

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

SBDM-Reg-2011-Ver 1.0