



Ontario Quarter Horse Racing Industry Development Program Mare Breeding Incentive Application



2019
BREEDING YEAR

- An Incentive of \$1,000 will be paid to owner/lessee of the mare at time of breeding, upon provision of proof (veterinary certificate) of mare being in foal 60 days or more post breeding.
- Owners must submit a 2019 *Mare Breeding Incentive Application* form for each mare.
- Eligible mare must have been enrolled in the QHRIDP previously, or raced at Ajax Downs in the past two years.
- Payment will be made to the owner(s) of record/lessee(s) of the mare at time of breeding. Should the ownership of the mare change, it is the responsibility of the owner at time of breeding to provide proof of the mare being in foal.
- Both mare and owner must be enrolled in the QHRIDP in the current year.
- Applications are due no later than 15 days after the last day of racing.

FOR OFFICE USE ONLY

Date Received: _____

Date Processed: _____

Processed By: _____

Received: Mail ___ Fax ___ Email ___

Approval Date: _____

Signature: _____

Mare Information (PLEASE PRINT)

Name of Mare				AQHA #	
Stallion				Breeding Dates	
Name of Owner/Lessee				AGCO Licence #	
Address				Telephone (B)	
City/Town				Telephone (H)	
Province/State		Postal Code		Email	

Eligibility Information

Mare was previously enrolled in the QHRIDP as a broodmare or	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Mare raced at Ajax Downs in 2018 or 2017	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Mare is enrolled in the QHRIDP for 2019	<input type="checkbox"/> YES	<input type="checkbox"/> NO
I am enrolled in the QHRIDP and AGCO licenced	<input type="checkbox"/> YES	<input type="checkbox"/> NO
I have enclosed proof of the mare being in foal (veterinarian's certificate)	<input type="checkbox"/> YES	<input type="checkbox"/> NO

MANDATORY DECLARATION

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 the horses to which this application may apply has full knowledge of the filing of this document. I further certify that each person or entity having ownership interest in horses to which this application may apply 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 understand that the Program Registry may share my contact information (including by electronic means) for the purpose of administering the Ontario Quarter Horse Racing Industry Development Program. I agree to comply with the Horse Racing Licence Act, 2015, and the Rules of Thoroughbred Racing and Rules of Quarter Horse Racing of the Alcohol and Gaming Commission of Ontario (AGCO). I further certify that information on this form is complete and correct, and I hereby assume full responsibility for the information provided. I understand that 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.

Print Name of Owner **X** _____

Signature of Owner **X** _____ Date _____

Completed Forms Should Be Sent To: Ontario Racing c/o Woodbine Mohawk Park PO Box 160, Campbellville, ON L0P 1B0 Attention: Quarter Horse Program	For information regarding the Program, contact Kathie Wilkinson, Quarter Horse Program Coordinator: PHONE: (416) 477-5529 FAX: (416) 477-5499 EMAIL: qhprogram@ontarioracing.com
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