



# 2018

## FOAL YEAR

### Ontario Resident Mare Program EMBRYO TRANSFER DONOR MARE ENROLMENT

To qualify as an ONTARIO RESIDENT MARE, the donor mare must be enrolled with the Standardbred Improvement Program for each foaling year. See requirements in box below. Complete details of the Program can be found in the Program Criteria Book. There is an annual fee of \$100 to enrol a donor mare as an ONTARIO RESIDENT MARE prior to the recipient mare's foaling date. **The enrolment fee for any donor mare enrolled after the recipient mare's foaling date will be \$300, payable by September 1<sup>st</sup> of the foaling year. Definitive third party proof of residency and foaling in Ontario will also be required before the mare will be accepted into the Program after her foaling date.**

**FOR OFFICE USE ONLY:**

Date Enrolled: \_\_\_\_\_

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

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

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

For more information or to submit completed forms (with all required payments):

Ontario Racing

Phone: 416-477-5529

Attention: Ontario Resident Mare Program

Fax: 416-477-5499

c/o Woodbine Mohawk Park

Email: [ontariomare@ontarioracing.com](mailto:ontariomare@ontarioracing.com)

PO Box 160, Campbellville, ON L0P 1B0

***Make cheques payable to: Ontario Racing in Trust for HIP***

**Note:** Any Owner, Lessee or Authorized Agent signing this application must hold a current valid Alcohol and Gaming Commission of Ontario (AGCO) licence. An Authorized Agent may sign on behalf of an Owner or Lessee, **IF:**

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

To qualify as an ONTARIO RESIDENT MARE for the 2018 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. (See above for details concerning enrolling after foaling date)
- The embryo transfer procedure **does not** have to occur in Ontario.
- The Embryo Transfer Donor Mare and the Recipient Mare must be resident in Ontario at the time of enrolment.
- The Recipient Mare must complete the 180-day residency requirement and remain in Ontario through foaling in Ontario.

**The day this form is postmarked is considered to be Day One of the residency period for the Recipient Mare unless enrolling after the recipient mare's foaling date.**

**EMBRYO TRANSFER DONOR MARE INFORMATION**

<b>Registered Name of Donor Mare:</b>	Tattoo/Freeze Brand Number:	Year of Birth: (yyyy)
<b>Location where transfer procedure took place:</b>	Anticipated 2018 Foaling Date: (dd/mm/yyyy)	

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

Name (optional) of <b>primary farm</b> where the <b>Recipient Mare</b> will reside for the 2018 foaling season:		Name (optional) of <b>secondary farm</b> where the <b>Recipient Mare</b> will reside for the 2018 foaling season:	
Farm Manager or Contact Person:		Farm Manager or Contact Person:	
AGCO Licence # (if applicable):		AGCO Licence # (if applicable):	
911 Farm Address: (If no street Address, please give county, township, lot and concession number):		911 Farm Address: (If no street Address, please give county, township, lot and concession number):	
<b>Ontario</b>		<b>Ontario</b>	
City /Town:	City /Town:	Postal Code:	Postal Code:
Phone:	Phone:	Phone:	Phone:
Cell:	Cell:	Cell:	Cell:
Fax:	Fax:	Fax:	Fax:
Email of primary farm:		Email of secondary farm:	

**Permission must be received from the Program Administrator for a recipient mare to leave Ontario during the residency period. Ontario Racing must be notified prior to departure.**

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

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**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 Ontario Racing.

I agree to comply with the Alcohol and Gaming Commission of Ontario (AGCO) *Rules of Standardbred Racing*.

I further certify that I have read and understand the conditions of mare eligibility as most recently published by Ontario Racing 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.

**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.**

PLEASE PRINT YOUR NAME CLEARLY IN THIS BOX AND SIGN BELOW:

**SIGNATURE:** **X** \_\_\_\_\_  
 DATE: \_\_\_\_\_  
 AGCO 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** \_\_\_\_\_