



**SEPARATE FORMS ARE REQUIRED FOR EACH STALLION**

**Completed forms  
should be sent to:**

**Ontario Racing Attention: TIP Coordinator**  
555 Rexdale Boulevard, P.O. Box 156, Toronto, ON, Canada M9W 5L2  
Phone: (416) 675-3993 ext. 2633 Fax: (416) 213-2104  
Email: adouglas@ontarioracing.com

**FOR OFFICE USE ONLY:**

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

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

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

This declaration may be submitted in lieu of a copy of the actual lease for any leased stallion that is registered as an ONTARIO SIRE in the Thoroughbred Improvement Program. The term of the lease must include the stallion standing his entire NORTHERN HEMISPHERE STUD SEASON in Ontario. In order to register a stallion as an ONTARIO SIRE, you must submit the current year's *Thoroughbred Stallion Registration* form.

STALLION INFORMATION		
Stallion Registered Name:		Year of Birth: (yyyy)
		CTHS/The Jockey Club Number:
Lease Term (Number of Years):	Date on which lease became effective: (dd/mm/yyyy)	Will this stallion stand in the Southern Hemisphere during his lease term? <input type="checkbox"/> YES <input type="checkbox"/> NO
LESSEE INFORMATION		
Lessee Name:		
Address:		
City/Town:	Province/State:	Postal Code
Phone:	Email:	
OWNER INFORMATION		
Owner Name:		
Address:		
City/Town:	Province/State:	Postal Code
Phone:	Email:	
MANDATORY DECLARATIONS		
<ul style="list-style-type: none"> <li>I certify that the term of the lease includes this stallion standing his entire NORTHERN HEMISPHERE STUD SEASON in Ontario.</li> <li>I, the undersigned, certify that I have full power and authority to execute and file this declaration and that each person or entity having ownership interest in this horse has full knowledge of the filing of this document. I further certify that each person or entity having ownership interest in this horse has authorized me to complete and file this declaration 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 <i>Horse Racing Licence Act, 2015</i>, and the <i>Rules of Thoroughbred Racing</i> of the Alcohol and Gaming Commission of Ontario (AGCO).</li> <li>I further certify that I have read and understand the conditions of stallion eligibility as published by Ontario Racing and certify that this stallion meets these eligibility requirements and that the information stated on this form is true and correct. I hereby assume full responsibility for the information provided.</li> <li>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.</li> <li><b>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.</b></li> </ul>		
SIGNATURE: X _____		I am the: <input type="checkbox"/> Owner/Member of the Ownership Group, <b>OR</b> <input type="checkbox"/> Lessee/Member of the Lessee Group, <b>OR</b> <input type="checkbox"/> Authorized Agent
Date: _____		
AGCO/ORC Licence # _____		

**Either the Owner (Lessor) or the Lessee must have a current, valid AGCO/ORC licence.** If an Authorized Agent is signing on behalf of an Owner/Lessee, they must be an Ontario Resident, hold a current, valid AGCO/ORC licence, and the *Appointment of Authorized Agent* form must be on file with the Program Administrator.

**YOU MUST COMPLETE AND SIGN ALL DECLARATIONS ON THIS FORM**