



## 2022 BREEDING YEAR

## STALLION REGISTRATION

FOR OFFICE USE ONLY: SEPARATE FORMS ARE REQUIRED FOR EACH STALLION Date Received: Completed forms should be sent to: For more information, contact: Date Entered: Ontario Racing **OSS Administration Coordinator** Processed By: \_ Standardbred Improvement Program Phone: 905-854-7808 c/o Woodbine Mohawk Park Email: ossprogram@ontarioracing.com PO Box 160 Campbellville, ON L0P 1B0 Make cheques payable to: "Ontario Sires Stakes" Note: Any Owner, Lessee, or Authorized Agent signing this application must hold This registration form and all fees must be submitted to the above address no later than a current valid Alcohol and Gaming JANUARY 15, 2022 or the \$500 late fee will apply. Commission of Ontario (AGCO) license. ☐ Renewal (registered in 2021) \$100 An Authorized Agent may sign on behalf LEVY: 50% of the stud of an Owner or Lessee, iF: \$200 fee declared or \$500, ■ New (not registered in 2021) • The Owner or Lessee holds a valid, whichever is greater. current AGCO license. ☐ Late (after January 15, 2022) \$500 \_\_\_\_\_ This Levy is due and The Authorized Agent holds a valid current AGCO license, AND payable for each stallion. **PLUS LEVY:** The appropriate Authorized Agent documents are recorded on file with **TOTAL FEE ENCLOSED:** Standardbred Canada. I am aware that a stallion cannot be registered for the Program after he has bred any mares in the current season. I declare that this stallion has not, and will not, breed any mares before this application is approved by the Program. Signature X

STALLION INFORMATION					
Stallion Registered Name:	Year of Birth: (yyyy)		Tattoo / Freeze Brand Number:		Gait:  ☐ TROT ☐ PACE
Sire:	Dam:			Sire of Dam:	
Was this stallion registered as an Ontario Sire in 2021?	☐ YES ☐	I NO	Will this stallion stand i Southern Hemisphere		□ YES □ NO
Registered Owner:				Province / St	tate of Residence:
Is the Stallion Leased?  If yes, what year does the lease expire? (yyyy)  A copy of the lease must be on file with Standardbred Canada		If Leased, Name of Lessee:			Province / State of Residence:
Name of farm where stallion will be stan	ding for the 202	2 Bree	ding Season:		
Farm Address: (If no street address, please	e give county, tow	vnship,	lot and concession numb	oer):	
City / Town:			Province: Ontario	Post	al Code:
Contact Person:			Phone:		Fax:
Please provide website of farm where stallion is standing:			Please provide email of farm where stallion is standing:		
YOU MUST COMPLETE AND SIGN ALL	DECLAPATIONS	SONR	OTH SIDES OF THIS EA	DPM	SB-Stallion-Reg-2022 ver. 1.

MA	MANDATORY DECLARATIONS Your signature below constitutes your agreement to all conditions.						
1.	I declare that the highest advertised 2022 stud fee for this stallion will be \$						
	Please Note: If you do not wish the stud fee to be published or posted on the Program website you may list "Private Fee" on the line above. However, you must then specify the highest amount you would charge for a service fee on the line below.						
	Highest Service Fee:						
2.	In the case where <b>this stallion is a renewal</b> and <b>not</b> a Dual Hemisphere stallion,	3. In the case where this stallion is a renewal,					
	☐ <i>I declare</i> that this stallion did not leave the Province of Ontario for breeding purposes at any time during the 2021 breeding season.	<ul> <li>□ No mares were bred with frozen semen in the 2021 Northern Hemisphere breeding season OR</li> <li>□ One or more mares were bred in 2021 with frozen semen collected while the stallion was in Ontario and registered for the Program.</li> </ul>					
4.	For Dual Hemisphere Stallions of 2021:						
	Date of <b>Return to</b> Ontario from Southern Date of <b>Departure from O</b> Hemisphere in 2021:	Date of <b>Departure from Ontario</b> in 2021: If U.S. quarantined, <b>Date of Departure from North America</b> in 2021:					
	(dd/mm/yyyy)	_ (dd/mm/yyyy)	(dd/mm/yyyy)				
5.	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 owner/lessee to provide						
	<ul> <li>further documentation to verify eligibility for the Program.</li> <li>I understand that should I fail to provide documentation as requested the stallion may be ineligible for <b>Ontario Sire</b> status.</li> </ul>						
	<ul> <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 Standardbred Improvement Program.</li> </ul>						
	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 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 application form and that I have full power and authority to receive any requested or related documents from the Program Administrator.  I agree to comply with the <i>Horse Racing Licence Act</i> , and the <i>Rules of Standardbred Racing</i> of the Alcohol and Gaming Commission of						
	Ontario (AGCO).  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.						
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.							
SIG	SNATURE: X	I am the:					
		☐ Owner or Corre	sponding Officer of the Ownership Group				
PLI	EASE PRINT NAME:	☐ Lessee or Corre	esponding Officer of the Lessee Group				
DA	TE: (dd/mm/yyyy)	☐ Authorized Age	nt				
AG	CO LICENCE #:	A copy of the appropriate Authorized Agent and/or lease documents must be on file with Standardbred Canada.					
EX	PIRY DATE: (dd/mm/yyyy)						
PR	IVACY 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						