

MASS THOROUGHbred BREEDERS' ASSOCIATION

BROODMARE ARRIVING BEFORE 12/15/2027 REGISTRATION FORM

1. Mare: _____ Dam: _____ Est. arrival: _____

2. JC#: _____ Microship: _____ YOB: _____

Mare's present owner, lessee, or agent (circle one): _____

Address: _____
(Street) (City) (State) (Zip)

Email: _____ Phone: _____

3. Foaling Farm: _____ Manager: _____

Location: _____
(Street) (City) (State) (Zip)

Email: _____ Phone: _____

4. Breeding information:

Mare is in foal to: _____ Date Last Bred: _____

Farm where stallion is located: _____

Address: _____
(Street) (City) (State) (Zip)

Email: _____ Phone: _____

5. Do you plan to breed back to a Massachusetts registered stallion? _____

DISCLAIMER: Nothing contained herein creates a contractual obligation for payment of any award or incentive by the MTBA or any other entity. The MTBA's receipt of sufficient funding is primarily dependent on the Racehorse Development Fund, and the incentives or awards are a condition precedent to any obligation it may have to pay any award or incentive under the MTBA program. The MTBA reserves the right at any time, with or without notice and in its sole discretion to (i) amend the requirements of the MTBA Program, (ii) change the amount of the incentive or award, or (iii) cease paying incentives or awards.

I hereby certify under pain and penalties of perjury that the information contained herein is accurate to the best of my belief and knowledge.

X _____
(Signature) (Date)

SEND TO: MTBA, 121 PINE STREET, REHOBOTH, MA 02769 or email to : MTBA@comcast.net

MTBA USE ONLY:

Date received: _____ Date approved: _____

Approved by: _____