



**APPLICATION TO MOVE A MARE OUTSIDE OF  
KENTUCKY IN CONNECTION WITH THE KENTUCKY  
THOROUGHBRED BREEDERS' INCENTIVE FUND  
(KHRC Form 20-6) (4/06)**

**KENTUCKY HORSE RACING COMMISSION**

**4063 Iron Works Parkway, Building B, Lexington, KY 40511, Phone: 859-246-2847 Fax: 859-246-2887**  
[www.khrc.ky.gov](http://www.khrc.ky.gov)

Please go to [www.khrc.ky.gov](http://www.khrc.ky.gov) for interactive online application. Please print clearly.

**BREEDER INFORMATION:**

**(Owner)**—(Print the name of the intended breeder of record as it will be reported to the Jockey Club). If multiple owners, partnership, corporation, etc. list according to the intended Jockey Club filings and use the managing owner's contact information below. Be sure to clearly identify the managing owner or entity name above.

\_\_\_\_\_  
 (Street) (City) (State) (Zip)  
 \_\_\_\_\_  
 (Phone Number) (Fax Number) (E-Mail Address)

**NEW BOARDING FARM INFORMATION**

(provide new location of the mare)

\_\_\_\_\_  
 (Name of Farm) (Farm Owner / Manager)  
 \_\_\_\_\_  
 (Street) (City) (State) (Zip)  
 \_\_\_\_\_  
 (Phone Number) (Fax Number) (E-Mail Address)

\_\_\_\_\_  
 (Date mare will begin boarding at above location)

NAME OF MARE	MARE'S YEAR OF BIRTH	SIRE OF DAM	COVERING SIRE	DATE MARE WAS OR WILL BE MOVED FROM KY. (MONTH, DATE, YEAR)

**AFFIDAVIT BY BREEDER OR THE AUTHORIZED AGENT.** I hereby certify that: above mare was will be moved from Kentucky for one of the following reasons (initial beside the paragraph below that applies):

1. A medical procedure is required to be performed to protect the health of the mare or the unborn foal that involves an extraordinary medical situation and the breeder desires to have an expert located outside of Kentucky conduct the procedure. The mare will remain under the care of a veterinarian during the entire period of time she is not residing in Kentucky other than the time she is traveling to and from Kentucky. Information relating to the procedure is included with this Application. \_\_\_\_\_
2. The mare has not yet delivered her first foal and is in active training outside of Kentucky. The breeder has provided information regarding the training outside of Kentucky with this Application. I understand the mare must return to Kentucky within 10 days after the end of her racing career and will notify the KHRC when she returns to Kentucky. \_\_\_\_\_

**THIS FORM MUST BE FILED WITHIN 14 DAYS OF MOVING THE MARE FROM KENTUCKY.**

\_\_\_\_\_  
 QUALIFIED BREEDER OR AUTHORIZED AGENT (print name)

\_\_\_\_\_  
 (signature)

**If by agent, Authorized Agent Form must be on file with the KHRC**

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Received by: \_\_\_\_\_ (KHRC Staff)

Date: \_\_\_\_\_ Time: \_\_\_\_\_

\_\_\_\_\_ (Registration Number of mare supplied by The Jockey Club)

**Approval of the Executive Director of the Kentucky Horse Racing Authority:**

\_\_\_\_\_ **Date:** \_\_\_\_\_

**Reported to the Kentucky Horse Racing Authority on Date:** \_\_\_\_\_