

## **Kentucky Thoroughbred Breeders' Incentive Fund Application for Late Mare Registration**

Please print clearly and submit completed form by mail, fax, or email to:

## **KENTUCKY HORSE RACING COMMISSION**

4063 Iron Works Pkwy, Bldg. B | Lexington, KY 40511 Ph: 859-246-2847 | Fax: 859-246-2887 | Email: kbif.khrc@ky.gov | registerkbif.com

## **Registration Deadline and Fees:**

August 16 - December 31<sup>st</sup> of the cover year: \$150

January 1 - December 31<sup>st</sup> of the weanling year: \$750

January 1 - December 31<sup>st</sup> of the yearling year: \$1,500

Breeder					
Street		City	State	Zip	
Phone	Fax	E-Mail			
BOARDING FARM INFORMAT	ΓΙΟΝ: (Mare must mai	ntain residence in Kentucky	to qualify)		
Farm	Farm Owner/Manager				
Street(No PO Box)		City	State Zip_		
Phone	Fax	E-Ma	ail		
NAME OF MARE	MARE'S YEAR	SIRE OF MARE	COVERING SIRE	YOB	
	OF BIRTH				

NAME OF MARE	MARE'S YEAR	SIRE OF MARE	COVERING SIRE	YOB		
	OF BIRTH					
AFFIDAVIT BY BREEDER OR BREEDER'S AUTH understand that any material misrepresentation or any other applicable penalty available under Kentuc was granted pursuant to 810 KAR 1:070 Section 5. I certify that each foal when delivered will meet the 810 KAR 1:070 may subject me to the penalties con any additional information requested by the comm then the agent, as well as the breeder, may be subj	omission in this appl cky law. I certify that also certify that the requirements set for stained therein and o ission relating to the	ication may subject me to all applicable per the above mare(s) has been in Kentucky di mare(s) is in foal to a sire registered as a Ke th in 810 KAR 1:070 Section 5. I understan ther applicable penalties provided by Kentu registration or the registration(s) may be d	nalties under KRS Chapter 230, 810 KAR Cl uring her entire gestation period, unless a entucky Thoroughbred Development Fund d that failure to meet any requirement co acky statute or regulation. I agree to pror enied or revoked. If submitted by an auth	napter 1, and n exception Sire. I ntained in nptly provide orized agent,		
QUALIFIED BREEDER OR AUTHORIZED AGENT (print name) Signature						
For Official Use Only						
Received by:	KHRC	Staff				

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