

Kentucky Thoroughbred Breeders' Incentive Fund Notice of Withdrawal of Foal

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

Received by:_____ KHRC Staff

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

reeder				
treet		Cit	ty	State Zip
hone	Fax		E-Mail	
NAME OF MARE	MARE'S YEAR OF BIRTH	SIRE OF MARE	COVERING SIRE	DATE MARE WAS OR WILI BE MOVED FROM KY. (MONTH, DATE, YEAR)
30, KAR Title 810, and any other	ny material misrepresentati applicable penalty availabl ropriate penalties. I hereby	on or omission in this applicate under Kentucky law. If suld certify that I desire to move	ation may subject me to all appli bmitted by an authorized agent, the above mare(s) outside of K	cable penalties under KRS Chapte then the agent, as well as the entucky. By doing so, I understand
UALIFIED BREEDER OR AU	JTHORIZED AGENT (p	orint name) Sig	nature	