Virginia-Sired Thoroughbred

Virginia Breeders Fund Application for Registration of a Virginia-Sired Thoroughbred

PLEASE PRINT OR TYPE		
Foaling Date:	Name of VA-Sired thorout	ughbred (if named):
Dam:	Sire:	
Dam's Sire:		Color:
Sex: COLT - RIDGELING - GELDING - FILLY -		
VA-Sired thoroughbred's Jockey Club Registration No. (f available):	
Name of farm/clinic where conceived:		
Name of foaling farm/clinic:	City:	State:

Breeder of Record Information

• The Breeder of Record listed with the VTA must be the SAME as the Breeder of Record listed with the Jockey Club.

• The Breeder of Record is the owner of the dam at the time the foal was dropped.

Owners Information

W-9 forms will be required to be filed with VTA in order to collect any Owners Awards. Winners will be contacted and must return a completed W-9 before prize monies will be awarded.

Affidavit: I, the undersigned, hereby certify that, pursuant to the information given by me above, this thoroughbred horse was conceived in Virginia (but born in a different state) and sired by a stallion registered with the Virginia Breeders Fund, and that this horse is eligible for Virginia-sired registration and participation in the Virginia Breeders Fund. I assume full responsibility for the registration of this horse, and agree that if the horse is later proved to be ineligible based on false or fraudulent information provided by me; 1) the horse shall no longer be considered a Virginia-sired thoroughbred; 2) I may be forever denied the privilege of participating in the Virginia Breeders Fund incentive programs; 3) any awards paid based upon the performance of an ineligible horse shall be returned in fully by the recipient to the Virginia Breeders Fund; 4) I am subject to any and all civil and criminal penalties associated with providing fraudulent information under the laws of the State of Virginia.

ELIGIBILITY FOR REGISTRATION: The thoroughbred mush have been foaled in Virginia. All applications must be complete and accompanied by the appropriate registration fee or they will be returned. Please make checks payable to and submit registration application/fees to: The Virginia Breeders Fund, 250 West Main Street, Suite 100, Charlottesville, VA 22902 | (434) 977-3716 | (434) 979-2439 fax | www.vabred.org

Owner's Signature: _____

Printed Name: _____ Date: _____