



# Virginia-Sired Thoroughbred

VBF APPLICATION FOR REGISTRATION OF A VIRGINIA-SIRED THOROUGHBRED

Please complete this form to register your horse in the Virginia Breeder's Fund Virginia-Sired Thoroughbred Program.

**ALL FIELDS ARE REQUIRED; if field does not apply please write "n/a".**

## FEE SCHEDULE

	VTA Member Fee	Non-Member Fee
One Time Registration Fee <i>(any age)</i>	\$25	\$125

## ELIGIBILITY FOR REGISTRATION

The thoroughbred must have been conceived in Virginia and foaled out of state. Completed applications must be accompanied by the appropriate registration fee. **Please make checks payable to: The Virginia Thoroughbred Association, 250 W. Main St, Suite 100, Charlottesville VA 22902.**

## HORSE INFORMATION

Foaling Date \_\_\_\_\_ Name of Horse \_\_\_\_\_  
(if available)

Dam \_\_\_\_\_ Sire \_\_\_\_\_

Dam's Sire \_\_\_\_\_ Color \_\_\_\_\_ Sex \_\_\_\_\_

Jockey Club Reg. # *(if available)* \_\_\_\_\_

Name of Farm/Clinic Where Foal Was Conceived \_\_\_\_\_

Name of Farm/Clinic Where Foal Was Dropped \_\_\_\_\_

Foaling City \_\_\_\_\_ Foaling State \_\_\_\_\_

## BREEDER OF RECORD INFORMATION

- The Breeder of Record listed with the VTA must be the SAME as the Breeder of Record listed on the Jockey Club papers.
- The Breeder of Record is the owner of the dam at the time the foal was dropped.

Breeder of Record \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

## OWNER INFORMATION

Name of Owner \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**Affidavit:** I, the undersigned, hereby certify that, pursuant to the information given by me above, this thoroughbred horse was foaled in Virginia and is eligible for the Virginia-Bred 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-Bred 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 full 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.

**DISCLAIMER:** Nothing contained herein creates a contractual obligation for payment of any award or bonus by the VTA or any other entity. The VTA's receipt of sufficient funding for the bonus or award is a condition precedent to any obligation it may have to pay any award or bonus. The VTA reserves the right at any time, with or without notice, and in its sole discretion to (i) change the amount of the bonus or award or (ii) cease paying bonuses or awards.

Owner/Owner's Agent Signature \_\_\_\_\_

Printed Name \_\_\_\_\_ Date \_\_\_\_\_