



THE COMMONWEALTH OF MASSACHUSETTS

Department of Agricultural Resources
Division of Animal Health, Standardbred Breeding Program
251 Causeway Street, Suite 500, Boston, MA 02114
617-626-1700 Fax: 617-626-1850 www.mass.gov/agr



STANDBRED BROODMARE RESIDENT REGISTRATION

Completed form due **DECEMBER 1**

For mares bred in 2017 and foals born in 2018, Standardbred horses are eligible to the Massachusetts Sire Stakes Program if they are the foal of a Standardbred mare that resides in the Commonwealth from December 1 of the year prior to foaling and continue such residence until foaling, and foals in the Commonwealth. If the mare listed on this form moves prior to foaling, this Department must be notified in writing. This form must be completed and returned to this office along with a copy of the mare's registration papers, or USTA registration information no later than DECEMBER 1, 2017.

1. Broodmare information:

Name of mare: _____ Freeze brand/Tattoo#: _____

Mare's present owner, lessee, or agent: _____

Address: _____ Telephone: _____
(Street) (City or town) (State) (Zip code)

Email address: _____

2. Broodmare's location on December 1 this year:

Farm name: _____ Farm owner/manager: _____

Farm address: _____ MA, _____ Telephone: _____
(Street) (City or town) (Zip code)

3. Breeding information:

Mare bred to: _____ Date last bred: _____
(Name of stallion)

Stallion location: _____ Telephone: _____
(Name of farm) (Address) (City, state, zip)

4. Signatures:

I hereby certify under the pains and penalties of perjury that the information contained herein is accurate to the best of my belief and knowledge:

X _____
(Signature of breeder, owner, lessee or agent) (Date)

Pursuant to M.G.L. Chapter 62C, section 49A, I certify under penalties of perjury that I, to the best of my knowledge and belief have filed all State tax returns and paid all State taxes required under law.

X _____
(Signature of breeder, owner, lessee or agent) (Date)