## **APPLICATION FOR CALIFORNIA-SIRED REGISTRATION OF THOROUGHBRED FOALS**

	Address all o	communication	ns to					
DO NOT WRITE HERE		THORO	UGHBRED			WRITE HEF		
Fee Paid \$	BREEDERS	ASSOC	IATION	Seal on Ce	ert			
Foal of Sire Registered	201 Colorado Place, P. O. Box 60018 • Arcadia, CA 91066-6018 Phone (626) 445-7800 • Fax (626) 574-0852				Date			
Ву								
Breeder of Foal			Owner of Foal if same as breeder, check here 🗖					
CTBA Member? YES □ NO □			CTBA Member? YES □ NO □					
Breeder's Address		Owner's A	ddress					
Street or Box No.			Street or Box No.					
City State	Zip plus 4	City		State		Zip plus 4		
State where foaled								
Name of Foal	ned, leave blank	Color		ate of oaling	Month	Day	Year	
Sire	Dam		D	am's Sire_				
Farm where sire stood when bred to dam _			City			State		
Jockey Club Certificate No		If not received,	check here 🗇					

## PLEASE READ THIS PORTION OF APPLICATION BEFORE SIGNING

The applicant assumes full responsibility for the proper identification of the above foal as a California-sired horse and agrees that if it should later be proved ineligible, all moneys won in California-bred races will be forfeited and refunded.

A "California-sired horse" is a thoroughbred that was conceived in California by a registered California stallion. A California-sired horse is only eligible for entry in races restricted to California-bred or California-sired horses and is not eligible for any breeder or owner awards.

Signature .

If agent so state

\_ Date \_

NEW FEES AS OF JANUARY 2013 CALIFORNIA-SIRED FOAL REGISTRATION					
CTBA MEMBER	NON-MEMBER				
\$100.00	\$125.00	If applied for by September 30 of foal's yearling year (the year following its birth).			
\$125.00	\$150.00	If applied for after September 30 of yearling's year but before January 1 following.			
\$750.00	\$750.00	If applied for after January 1 of two-year-old year.			

California-sired registration cannot be completed until the Jockey Club Certificate of Registration is submitted. However, it is permissible to file application (with fee) in advance of receipt of certificate, which application will then be held in pending file without penalty until such time as certificate is available for completion of registration.



201 Colorado Place, Arcadia, CA 91007 (626) 445-7800

## Instructions

- 1. Complete the form and type all credit card billing information in the blanks below.
- 2. E-mail the completed form with your registration.

## **CREDIT CARD AUTHORIZATION FORM**

I,, hereby authorize California Thoroughbred Breeders Association to charge my credit card account in the amount of \$							
VISA	MasterCard						
Credit Card Number: Expiration Date:/ VID Code:							
Credit Card Billing Address:							
Street:							
Zip Code: Telephone: ()							
Country: (if not US)	_						
Authorized Signature							

Your completion of this authorization form helps us to protect you from credit card fraud. All information entered on this form will be kept strictly confidential by California Thoroughbred Breeders Association.