

**OKLAHOMA HORSE RACING COMMISSION**

**APPLICATION FOR THE EXPENDITURE OF OKLAHOMA BREEDING  
DEVELOPMENT FUND SPECIAL ACCOUNT MONIES FOR RETIRED AND UNWANTED  
OKLAHOMA-BRED RACING STOCK**

Organization: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Physical Address [if different from mailing address] \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Person in Charge of Organization: \_\_\_\_\_

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Horse's Name: \_\_\_\_\_

Breed: \_\_\_\_\_ Is the horse registered in the Oklahoma-Bred Program? \_\_\_\_\_

Date of last race [attach documentation]: \_\_\_\_\_ Date of last workout [attach documentation]: \_\_\_\_\_

Have the ownership of the horse AND the horse's registration papers been turned over to the Organization or its designated subcontractor? \_\_\_\_\_

Has the Organization received money from the Oklahoma Horse Racing Commission for retired and/or unwanted racing stock? \_\_\_\_\_ If so, for how many horses has the Organization received funds? \_\_\_\_\_

Names of all horses for which the Organization received funds: \_\_\_\_\_

Has the Organization filed an ownership transfer application, which transfers ownership of the horse to the Organization or its subcontractor, with the Oklahoma-Bred Registry Department? \_\_\_\_\_

Has the Organization submitted the horse's original registration papers with the Oklahoma-Bred Registry Department? \_\_\_\_\_

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\_\_\_\_\_ Proof that the Organization is exempt from taxation under 26 USC § 501(c) is attached.

\_\_\_\_\_ The Thoroughbred Racing Association of Oklahoma's request that the Organization receive funds from the account, **for this calendar year**, is attached.

\_\_\_\_\_ Attached is a description of the Organization's \_\_\_\_\_ Adoption or \_\_\_\_\_ Pension program.

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If the Organization uses a subcontractor, please provide the following information:

Name of subcontractor: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail: \_\_\_\_\_

**NOTE:** If the Organization uses multiple contractors, please provide the information requested above for each contractor.

Please initial on the line next to each statement, affirming that you have read and understood each statement and agree to abide by its terms:

- \_\_\_\_\_ I understand that horses in the Organization's program must have access to clear, palatable, safe water and must be able to drink their fill of water at least twice a day.
- \_\_\_\_\_ I understand that the Organization's program shall permit horses to have free access to natural or constructed shelter that is well-ventilated with adequate space and free of hazards. Further, I understand that stabled horses shall be allowed exercise daily.
- \_\_\_\_\_ I understand that the Organization's program shall ensure that horses are free of significant health problems or receiving appropriate health care to prevent unnecessary discomfort and promote prompt return to well-being.
- \_\_\_\_\_ I understand that the Organization's program shall ensure that horses receive adequate hoof care to allow horses to stand in a normal posture and move at all gaits without discomfort;
- \_\_\_\_\_ I understand that the Organization's program and all subcontractors shall allow random, unannounced inspections of their care operations by the Commission's Law Enforcement Division;
- \_\_\_\_\_ I understand that the Organization's program and all subcontractors shall file complete monthly reports with the Commission on the form provided by the Commission;
- \_\_\_\_\_ I understand that no horse in the Organization's program shall be sent to slaughter;
- \_\_\_\_\_ I understand that horses in the Organization's program shall never be raced again;
- \_\_\_\_\_ I understand that, in accordance with State law, money will only be paid after expenses are incurred; and
- \_\_\_\_\_ I understand that the Organization must notify the Commission's Executive Director within 48 hours on an eligible horse's leaving the Organization's adoption or pension program by virtue of death, adoption or any other reason.

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Applications will not be processed until **all required documents** have been submitted to the Oklahoma Horse Racing Commission.

I have read the Oklahoma Horse Racing Commission's Guidelines for the Expenditure of Oklahoma Breeding Development Fund Special Account Monies for Retired and Unwanted Oklahoma-Bred Racing Stock and OAC 325:75-1-21. I understand my obligations set forth in the Guidelines and the rule. Further, I understand that violation of any provision thereof may subject me to penalties.

SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_