



CAL-BRED Foal Registration Form

Name of Foal _____ AHA # _____

Color _____ Sex _____ Date foaled _____

Sire _____ AHA # _____

Dam _____ AHA # _____

Dam's Sire _____ AHA # _____

Current Owner _____ Phone # _____

Address _____ City _____ State _____ Zip _____

Social Security or Tax ID # _____ e-mail address _____

Breeding Information: (check one) Natural cover _____ OR Artificial insemination _____

Location _____ Date _____

Embryo transfer? No _____ Yes _____ Date of Embryo transfer _____ Location _____

Recipient Mare: Name _____ Breed _____ Reg. # (if any) _____

Transfer done by: Name _____ Phone # _____

Name of Ranch or place where foal was delivered _____

Address _____ City _____ State _____ ZIP _____

Recorded Breeder of Foal _____ Phone # _____

Address _____ City _____ State _____ Zip _____

Social Security or Tax ID # _____ e-mail address _____

Owner of Sire _____ Phone # _____

Address _____ City _____ State _____ ZIP _____

Name of ranch or place where sire stood _____

Address _____ City _____ State/Country _____ ZIP _____

PLEASE READ BEFORE SIGNING: I, the applicant, assume full responsibility for the proper identification of the above horse as a CAL-BRED and agree that if it should later be proved ineligible, all CAL-BRED award monies will be forfeited and returned. I fully understand the eligibility requirements for registering a horse as a California bred (refer to current regulations) and that the above horse is qualified for registration. I certify under penalty of perjury the foregoing is true and correct.

Signed at (location) _____ this _____ day of _____ 20 _____

Applicant Name (Print) _____ Signature _____

RETURN, WITH FEES, TO:

ARAC, D. Burt, Cal-Bred Committee
PO Box 2286
Danville, CA 94526

QUESTIONS- please e-mail:

doro.burt@yahoo.com
bvarabians@aol.com

CAL-BRED # _____

DATE REC'D _____

FEE PAID _____

PROCESSED BY _____

(See Fee Chart and additional rules and procedures on Reverse of this form.)

CAL-BRED REGISTRATION FEES (effective 4/1/19):

<u>Registration completed</u>	<u>ARAC Member</u>	<u>Non-Member</u>
•On or before December 31 of foaling year...	\$ 50.00	\$ 75.00
•On or before December 31 of their 2yr. old year.	\$ 75.00	\$100.00
•On or after January 1 of their 3yr. old year.	\$100.00	\$125.00

Should an application not be approved for any reason, or be withdrawn by the applicant, or requested information not be provided, the application fees will be refunded, less \$50.00 processing fee.

Additional Eligibility Rules and Procedures:

A purebred Arabian horse, registered with the Arabian Horse Association, conceived in California and foaled in California, shall be Cal-Bred eligible. Conceived in California includes conceived by natural service by a stallion standing in California OR conceived in California by artificial insemination from a stallion anywhere in the world.

A horse conceived in California, transferred via embryo transfer in California to a recipient mare who subsequently drops the resulting foal in California shall be Cal-Bred eligible. (ARAC BOD 3/17/19. Effective 4/1/19)

No races run prior to the horse being registered with ARAC as a Cal-Bred will qualify the Owner, Breeder, or the Cal-Bred Sire Owner for awards. For a horse to be considered Cal-Bred, the registration process must be completed at least 48 hours before time of entry in a race. Allow time for processing.

NOTE: The applicant is to notify the Administrator of any changes in the application information, including matters effecting eligibility, changes in ownership, and contact information.

NOTE: The Cal-Bred program may be changed at any time by State Legislation, or by the ARAC Board of Directors.