

**DELAWARE HARNESS RACING COMMISSION
REGISTRATION OF DELAWARE-BRED HORSE**

(1) Name of Horse _____

(2) Foaling Date of Horse _____

(3) Tattoo Number _____

(4) Sire of Horse _____

(5) Dam of Horse _____

(6) Owner of Dam at time of breeding, also include address

(7) Name, Address and Phone Number of person making request

I hereby swear or affirm that all of the foregoing information is true and accurate to the best of my knowledge, information and belief. I understand that any incorrect, untruthful or fraudulent information provided on this form may subject me to criminal and administrative penalties, including, but not limited to a minimum fine of \$5,000 and a mandatory two-year revocation of my DHRC licensing privileges in the State of Delaware.

DATE: _____

Signature

REVIEWED: _____ APPROVED DHRC: _____ DATE _____

DATE ENTERED ON DELAWARE OWNED LIST: _____