

Maryland Horse Breeders Association Ownership Disclosure Form

(I, we) own Thoroughbreds for breeding and/or racing in the State of Maryland in the name of:

_____ Street or Box Number _____ City, State, Zip

_____ Phone _____ S.S. or T.I.N. #

as a partnership, farm, stable, corporation totaling 100%, or a syndicate consisting of _____ shares owned by the following:

1.	Printed Name	Street or Box Number	% or No. of Shares Owned
	(a) _____ Signature	City, State, Zip	
2.	Printed Name	Street or Box Number	% or No. of Shares Owned
	(a) _____ Signature	City, State, Zip	
3.	Printed Name	Street or Box Number	% or No. of Shares Owned
	(a) _____ Signature	City, State, Zip	
4.	Printed Name	Street or Box Number	% or No. of Shares Owned
	(a) _____ Signature	City, State, Zip	
5.	Printed Name	Street or Box Number	% or No. of Shares Owned
	(a) _____ Signature	City, State, Zip	

Individual or individuals holding a combined interest of at least 51% in the above entity must sign under their printed name allowing

_____ to receive all correspondence and **payments** in the name of:
Corresponding Officer's Name

Individual's Name or Name of Entity _____ Street or Box No. _____ City, State, Zip _____

If payment is to be made to an individual you must give Social Security Number _____

If payment is to be made to other than an individual give Tax ID Number _____

If entity is a breeder or stallion owner, list farm where breeding stock is maintained: _____ Farm Name

Street _____ City, State, Zip _____ Phone _____

Any change in ownership or change of corresponding officer requires the filing of a supplemental form at time of change.

I agree to serve as corresponding officer for the above named entity and attest that all facts and signatures are true.

Return to:
Maryland Horse Breeders Association
P.O. Box 427
Timonium, Maryland 21094-0427
(410) 252-2100

Signature of Corresponding Officer

Sworn before me this _____ day of _____ 199____

Notary Public