

THE COMMONWEALTH OF MASSACHUSETTS

Department of Agricultural Resources

Division of Animal Health, Standardbred Breeding Program 225 Turnpike Road, Southborough, MA 01772

Phone: 617-872-9956 Fax: 617-626-1736 www.mass.gov/agr

Please note this is a new address and fax number!



STANDARDBRED STALLION REGISTRATION FORM Completed form due February 1, 2026

Email completed form to linda.harrod@mass.gov - phone 617-872-9956

In order to become a REGISTERED MASSACHUSETTS STANDARDBRED STALLION, the stallion shall be registered with the Department of Agricultural Resources on or before February 1, 2026. Provide a copy of the stallion's USTA registration papers along with this form. Said stallion shall stand on the registered farm for the entire breeding season which runs from February 1 through July 15. Should this stallion need to move off the farm listed below for any reason during the breeding season, MDAR must be notified immediately. *List of mares bred is due to MDAR by October 1, 2026*

| must be notified infinediat | ciy. List of mares brea is due to wib? | in by October 1, 2020 | | | |
|--|--|--|---|--------------------------------|--|
| 1. STALLION INFORM | MATION: | | | | |
| Stallions registered nam | e (USTA): | | | | |
| Freezebrand: | Microchip: | | Tattoo: | | |
| 2. STALLION OWNER | INFORMATION: | | | | |
| Stallion owners name: _ | | | | | |
| Stallion owners address: | (street) | (town) | (state) | (zip code) | |
| Stallion owners email ad | dress: | Phone: | | | |
| 2. LOCATION OF STA | LLION ON FEBRUARY 1: | | | | |
| Farm name: | | | | | |
| Farm owner/manager: _ | | | | | |
| Farm address: | (street address) | | , MA | | |
| | | | | | |
| | | Farm phone: | | | |
| 4. SIGNATURES: | | | | | |
| full breeding season of 202 accurate to the best of my | tandardbred stallion registered herewith 24.I hereby certify under the pains and p belief and knowledge. Pursuant to M.G. of my belief and knowledge have filed all | enalties of perjury that the inf L. Chapter 62C, Section 49A, | formation contain I certify under th | ed herein is e penalties of | |
| X (Signature of breeder, own | ner, lessee or agent) | | (Date) | | |
| X (Printed name of breeder, owner, lessee or agent) | | | (Date) | | |