

THOROUGHBRED RACING PROTECTIVE BUREAU

HORSE IDENTITY RESEARCH APPLICATION

Instructions: To request a search for information about your horse, please complete this form, sign it, and mail it to the Thoroughbred Racing Protective Bureau 420 Fair Hill Drive Suite 2 Elkton, Maryland 21921. Should you request a racing history a \$10.00 fee will be assessed.

Please include a check for \$10.00 with this completed form to cover the racing history.

_____ \$10.00 Racing History Requested

Your Name: _____

Owner of Horse (if different from above): _____

Mailing Address: _____ **Phone:** _____

Approximate age of horse: _____

Sex (Colt/Horse; Filly/Mare; Gelding): _____

Color (check one): ___ Black ___ Dark Bay or Brown ___ Bay ___ Chestnut ___ Gray ___ Roan

❖ **Tattoo brand on upper lip:** _____

I have completed this form as accurately as possible and have enclosed a check payable to the Thoroughbred Racing Protective Bureau, in the amount of \$10.00 in the event I request a Racing History. I understand that the pedigree and race record information given to me by the Thoroughbred Racing Protective Bureau is the product of research based on the tattoo number I have provided and is for identification purposes only. The Thoroughbred Racing Protective Bureau makes no representation that this information can be used to obtain a duplicate Jockey Club certificate of foal registration. I further understand that if I provide an incorrect tattoo number, I will in turn receive information that does not apply to my horse.

If a record search of the tattoo number I have provided is unsuccessful, I will be so notified.

Signature: _____

Date: _____

❖ **In order to facilitate this inquiry, you are requested to furnish legible photographs of the tattoo brand and markings of the horse.**