

THE OKLAHOMA THOROUGHBRED ASSOCIATION IN CONJUNCTION WITH
REMINGTON PARK, WILL ROGERS DOWNS AND THE OKLAHOMA BRED PROGRAM
PRESENT THE

OKLAHOMA STALLION STAKES

FOR FOALS OF NOMINATED OKLAHOMA BRED STALLIONS

FROM THE **2008** BREEDING SEASON.



PROGRAM TO CONSIST OF 2 RACES FOR 2 YEAR OLDS (1 filly & 1 colt) TO BE RUN AT REMINGTON PARK IN THE FALL OF 2011 AND 2 RACES FOR 3 YEAR OLDS (1 filly & 1 colt) TO BE RUN AT WILL ROGERS DOWNS IN THE SPRING OF 2012. ALL PROGENY OF NOMINATED OKLAHOMA BRED STALLIONS WILL BE ELIGIBLE TO PARTICIPATE. HOWEVER, THE MONIES FROM THE OKSBDF WILL BE AVAILABLE ONLY AS ADDED MONEY TO THE PURSES FOR ELIGIBLE OKLAHOMA BRED HORSES.

REMINGTON PARK 2YO RACES: \$55,000 est. (plus \$7,500 OKSBDF funds for purses and \$7,500 for breeder awards for eligible horses) for each race.

WILL ROGERS DOWNS 3YO RACES: \$50,000 est. (plus \$5,000 OKSBDF funds for purses and \$5,000 for breeder awards for eligible horses) for each race.

IN ADDITION TO THE ABOVE FUNDS, A STALLION PREMIUM AWARD WILL BE ESTABLISHED, FUNDS FROM THIS AWARD WILL BE PAID TO NOMINATORS OF STALLIONS FOR THE APPROPRIATE BREEDING YEAR.

STALLION NOMINATION FEE: \$1,250 FOR ALL STALLIONS WHOSE 2008 STUD FEE IS ADVERTISED AT OR ABOVE \$1,250. STALLIONS WHOSE STUD FEE IS

LESS THAN \$1,250, THE FEE IS **\$750**. (ALL MUST BE AN ELIGIBLE STALLION UNDER OKLAHOMA BRED RULES FOR YEAR NOMINATED). ALL NOMINATION FEES NOT PAID BY THE BELOW LISTED DATE, WILL BE DOUBLED, AND NO STALLION NOMINATIONS WILL BE ACCEPTED AFTER JULY 1, 2007.

2008 STALLION NOMINATION FEE IS DUE FEBRUARY 1, 2008

All payments must be postmarked by due date to be acceptable

TOTAL ADDED MONEY: REMINGTON PARK \$50,000, WILL ROGERS DOWNS \$50,000 and \$50,000 FROM OKSBDF FUNDS (subject to OHRC approval)

The OKLAHOMA THOROUGHBRED ASSOCIATION reserves the right to adjust the purses to the amount of funds available for each race. See back page for additional conditions. By submitting this form nominator accepts all terms and conditions as set forth.

STALLION _____ Stud Fee: _____

amount paid: _____ date: _____

NOMINATOR: _____ PHONE: _____

ADDRESS: _____ STATE _____ ZIP: _____



Return form to:
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