

Mid-Atlantic Thoroughbred ANNUAL STALLION DIRECTORY

PEDIGREE PAGE ORDER • \$575 PER HORSE

STALLION _____ COLOR _____ YEAR OF BIRTH _____ HEIGHT _____

SIRE _____ DAM _____ SIRE OF DAM _____

STUD FEE _____ TERMS: Live foal Payable _____ of year bred

Payable when foal stands and nurses \$ _____ Non-refundable booking fee Special consideration to approved mares

Other terms: _____

NOMINATED TO Breeders' Cup Maryland Million Registered New Jersey Stallion Registered Pennsylvania Stallion

Registered West Virginia Stallion West Virginia Breeders Classics Registered Virginia Stallion Other _____

PROPERTY OF _____

FARM STANDING _____

ADDRESS _____

PHONE _____

FAX _____ E-MAIL _____ WEB SITE _____

INQUIRIES TO _____

RECORD AT STUD

If you wish to include information on a test crop, give details: _____

CHECK IF APPLICABLE: Stands first season in _____

If stallion has sired foals in another country, please provide information:

Countries stood in previously: _____

Year of first North American season: _____

ADVERTISING DEADLINE — OCTOBER 1

Any questions, call *MID-ATLANTIC THOROUGHBRED* at (410) 252-2100 x116. Return completed contracts to *MID-ATLANTIC THOROUGHBRED*, 321 Main St., Reisterstown, MD 21136 or via email to barrie@marylandthoroughbred.com

ADVERTISING AGREEMENT

I authorize publication of a stallion pedigree page for the stallion _____, in accordance with the terms and conditions of the current rate card. I accept responsibility for payment for contracted advertisements in accordance with all the terms and conditions stated herein. I certify that I am duly authorized to do so on behalf of the advertiser and that the information is correct to the best of my knowledge. I understand that this stallion register page may be cancelled should the stallion die or be sold, provided *MID-ATLANTIC THOROUGHBRED* receives written notice from the advertiser prior to Nov. 1. In this event, the cost of research and preparation of the stallion pedigree page will be \$150.

PROOFS

Proofs will be sent out by November 6 via e-mail.
All changes/corrections due November 13.

Send proofs to:

NAME _____

E-mail _____

Phone no. _____

NAME _____

E-mail _____

Phone no. _____

Signed (stallion owner, syndicate manager, or authorized agent)

_____ Date _____

Mid-Atlantic Thoroughbred Stallion Directory pedigree page - **\$575**

SPECIAL PRE-PAY RATE: \$525 if this contract is accompanied by check

Bill to: _____

PREPAYMENT REQUIRED FOR ALL NEW ADVERTISERS

CHECK PAYABLE TO MID-ATLANTIC THOROUGHBRED or

CHARGE VISA, MASTERCARD, DISCOVER

Name on card _____

Address _____

Zip _____ Phone number _____

CC# _____

Expire date _____ 3-digit Security Code _____