PO Box 63
Sandgate Qld 4017
T (07) 3869 9774
E qbred@racingqueensland.com.au

IN FOAL REBATE CLAIM FORM

For the 2018/19 Standardbred Breeding Season (1 August 2018 to 31 January 2019), Racing Queensland will be assisting breeders through the 'In Foal' rebate ($500 per mare) to help offset increased costs incurred due to the Queensland drought.

To be eligible for the rebate, breeders must meet the following conditions:

- The mare must be a standardbred registered with Harness Racing Australia.
- The mare must be inseminated in Queensland by a standardbred stallion registered with Harness Racing Australia.
- A positive 42 day pregnancy test must achieved.
- The mare must be agisted in Queensland throughout the pregnancy.
- The breeder must not have already claimed an in foal rebate in respect of more than 4 mares.
- No prior in-foal rebate has been paid in respect of those mares.
- This form must be completed in full.

Applicant Details:

Surname:	Name/s:	
Address:		Post Code:
Mobile:	Email:	

Bank Details (only required if RQ doesn't already have the breeder's details):

Bank Name:	
Account Name:	
BSB:	Account No:

Declaration:

By submitting this rebate claim form to Racing Queensland:

- I declare that the information in this Claim form to be true and correct.
- I declare that I understand it is a serious offence under the Rules of Harness Racing to make a false declaration and/or provide false or misleading information to Racing Queensland.

I acknowledge that if this Claim is approved by RQ the rebate will be paid into my nominated Bank account by Racing Queensland

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Signature: _____

Name: _____

Date:_____

Address:_____

Contact phone number: _____

Please forward your completed forms to Racing Queensland via

E: qbred@racingqueensland.com.au

M: PO Box 63 Sandgate Qld 4017

Attention: David Brick

Please ensure the details for each mare the rebate is being claimed are completed overleaf.

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Mare Details:

Mare Name:	
Stallion Name:	
Where Served (Address):	
Where agisted during pregnancy (Address):	
+ 42 Day Pregnancy Test: ❑	Test Performed By:
Location for Pregnancy (Address):	

Mare Name:	
Stallion Name:	
Where Served (Address):	
Where agisted during pregnancy (Address):	
+ 42 Day Pregnancy Test: ❑	Test Performed By:
Location for Pregnancy (Address):	

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Stallion Name:	
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