

DELAWARE STANDARDBRED BREEDERS' FUND

Please Type or Print Legibly

SUSTAINING PAYMENT FORMNAME OF RACE: **Delaware Standardbred Breeders' Fund**FOALS OF **2024**TO BE RACED AT: **Harrington Raceway and Bally's Dover in 2026 & 2027**

CHECK PAYABLE TO AND

MAIL TO: **Delaware Standardbred Breeders' Fund, 2320 S DuPont Hwy, Dover, DE 19901**

OWNER OR AGENT

MAKING PAYMENT

PHONE: _____

STREET _____

CITY, STATE, ZIP _____

COUNTRY & POSTAL CODE (If Outside U.S.): _____

E-MAIL ADDRESS: _____

Indicate the Type of Payment and Total Amount (U.S. Funds Only)ONE PYMT ...\$300.00 **MUST HAVE MADE 5-15-2025 NOMINATION (OR 3-15-26 LATE) PAYMENT**DATE DUE **APRIL 15, 2026** TOTAL PAID _____Please provide the following information for each nominated horse
Use C, F, or G to indicate sex -- Do not use M for Mare.

NAME OF 2 YR-OLD (If Changed, Give Original Name Also)	AGE	SEX*	GAIT	SIRE	DAM	OWNER(S)	TRAINER
	2						

NOTE: The April 15th Payment must be made to retain eligibility as a 3-year old in 2027**Delaware Standardbred Breeders' Fund****2320 S DuPont Hwy, Dover, DE 19901****(302) 698-4610****<https://desbf.delaware.gov>**

For Office Use Only

RACE **DSBF**

Check # _____

CC _____

E-MAIL: Mark.Short@delaware.gov