

Consignment Form for the
**2008 RUIDOSO NEW MEXICO-BRED
THOROUGHBRED YEARLING SALE**

!!!ALL ENTRIES PASSING THROUGH THE SALE RING ARE ELIGIBLE FOR THE 2009 NEW MEXICO BRED TB SALE FUTURITY!!!

To Be Held: July 25 & 26 at the **Ruidoso Horse Sale Pavilion**, Ruidoso Downs, NM
ENTRY/WITHDRAWAL DEADLINE: April 15, 2008
Consignment Fee: \$450 at time of entry; **\$475** if paid after deadline or from proceeds

**TO BE ELIGIBLE FOR THIS SALE, ALL ENTRIES MUST BE "ACCREDITED NEW MEXICO BRED".
REGISTRATION PAPERS MUST BE STAMPED BY THE NEW MEXICO HORSE BREEDER'S ASSN
PRIOR TO ENTRY TO BE ELIGIBLE FOR CATALOGING.**

DUE AT TIME OF ENTRY:

Properly completed and signed **Consignment Form**.

Original Jockey Club **Certificate Of Foal Registration**.

(**Must** accompany *Consignment Form* if fees to be withheld from proceeds.)

Copy of **Registration Application** if registration pending.

DUE AT TIME OF OR PRIOR TO SALE:

A **Health Certificate** dated no earlier than ten days prior to Sale.

A negative **Coggins Test** dated no earlier than six months prior to the Sale.

EVA Lab Report dated no earlier than 90 days prior to the Sale, or proof of current **vaccination** due in Sales Office three weeks prior to Sale.

Please turn all documents into Sales Office immediately upon arrival.

Failure to do so will result in your animal being withdrawn.

CONSIGNED BY: _____

(complete this line EXACTLY as you wish it to appear on the first line of the catalog.)

MAILING

ADDRESS: _____ / _____ / _____ / _____
Street City State Zip

PHONE: _____ / _____ / _____ / _____
Residence Business Mobile FAX

E-Mail: _____

HORSE NAME: _____ Registration # _____
(Name requested if Registration is pending.)

Date Foaled: _____ Stallion Gelding Filly Color _____ NMHB Registry # _____

Sire _____ Dam _____

Dam's Sire _____ **ENGAGEMENTS:** Lineage Other _____

IMPAIRMENTS: Check If: Cribber Cryptorchid Sight Impaired Bleeder Wind Sucker Wobbler

Registered Owner(s) _____ / _____
(If other than "Consigned By")

MAILING

ADDRESS: _____ / _____ / _____ / _____
Street/POB City State Zip

PHONE # _____ / _____ / _____ / _____
Residence Business Mobile FAX

NET PROCEEDS PAYABLE TO: proceeds will be disbursed as specified here. If more than one check is requested, indicate % to each payee. Net proceeds will be paid to Registered Owner unless the owner signs below relinquishing the funds to another.

NAME _____ % _____

ADDRESS _____

NAME _____ % _____

ADDRESS _____

Owner Signature: _____

(Sign here if proceeds go to other than registered owner.)

AGENT AUTHORIZATION: I _____

hereby authorize: _____
to act as my agent, with authority on my behalf to do all acts and handle all matters deemed necessary, appropriate, or incidental by him/her to the sale of any animal owned by me and offered for sale at the Sale, including but not limited to the *Conditions of Sale* appearing on the *Consignor's Contract* on the reverse side of this form.

Agent's Address: _____

Phone _____ Mobile _____

Email _____ FAX _____

Owner's Signature _____

FOR OFFICE USE ONLY:

Date Rec'd: _____ Date Logged: _____ by: _____

Date Entered In Computer: _____ By: _____ Date Proofed: _____ By: _____

Enclosed: Reg. Certificate: _____ Copy _____ Reg. Applic _____ Transfer _____ EVA _____ Coggins _____

Fees Paid _____ Check # _____ \$ _____ or to be withheld from Proceeds _____ + \$25.00 late fee _____

Please read *Consignor's Contract* on reverse side. Signature is required for entry to be valid.

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