



**Ontario Quarter Horse Racing Industry Development Program
Third-Start Bonus Application**



2026
RACE YEAR

- A bonus of \$1,000 will be paid to the owner and trainer of record following the third start at Ajax Downs in 2026 by a Quarter Horse that has never made a start in Ontario in a previous year. (Exception for 2-year olds – see Criteria Book).
- Owners and trainers must submit a 2026 *Third-Start Bonus Application* form for each eligible horse to Ontario Racing along with documented proof of the horse’s three starts.
- Applications are due to Ontario Racing by Aug. 14, and one week after the end of racing.
- Should a horse be scratched prior to or not finish a race, that race will not count toward the bonus.
- There is a cap of \$10,000 per year payable to each ownership entity or trainer.

FOR OFFICE USE ONLY	
Date Received:	_____
Date Entered:	_____
Processed By:	_____
Received: Mail	___ Fax ___ Email ___

Horse Information (PLEASE PRINT)

Name of Horse		AQHA #	
---------------	--	--------	--

Race Information (PLEASE PRINT)

Race Information	Date dd/mm/yy	Race	Place	Ontario Racing Approval
First Start				
Second Start				
Third Start				

Trainer and Owner – Complete page 2

FOR ONTARIO RACING USE ONLY		
Age: _____	Program: _____	Non-Program: _____

<p>SUBMIT COMPLETED FORMS TO: Ontario Racing c/o Woodbine Mohawk Park PO Box 160, Campbellville, ON L0P 1B0 Attention: Quarter Horse Program EMAIL: qhprogram@ontarioracing.com</p>	<p>FOR INFORMATION REGARDING THE PROGRAM, CONTACT: Kara Martin Quarter Horse Program Coordinator: PHONE: (416) 576-6298 EMAIL: qhprogram@ontarioracing.com</p>
--	--



**Ontario Quarter Horse Racing Industry Development Program
Third-Start Bonus Application**



**2026
RACE YEAR**

Trainer Information

Trainer of Record as of Third Start (PLEASE PRINT)

Name of Trainer				AGCO Licence #	HP
Contact Information	Address			Telephone (B)	
	City/Town			Telephone (H)	
	Province/State		Postal Code	Email	

MANDATORY DECLARATION

I, the undersigned, certify that I have full power and authority to execute and file this application and that each person or entity having ownership interest in the horses to which this application may apply has full knowledge of the filing of this document. I further certify that each person or entity having ownership interest in horses to which this application may apply has authorized me to complete and file this application form and that I have full power and authority to receive any requested or related documents from Ontario Racing. I understand that the Program Registry may share my contact information (including by electronic means) for the purpose of administering the Ontario Quarter Horse Racing Industry Development Program. I agree to comply with the Horse Racing Licence Act, 2015, and the Rules of Thoroughbred Racing and Rules of Quarter Horse Racing of the Alcohol and Gaming Commission of Ontario (AGCO). I further certify that information on this form is complete and correct, and I hereby assume full responsibility for the information provided. I understand that the Program Administrator reserves the right to amend, cancel or alter the Program and/or make changes to the terms, conditions, and benefits of any nature and kind whatsoever and, the signatories of this form hereby agree to be bound by such changes

Signature of Applicant (Trainer) X _____ **Date** _____

Owner Information

Owner of Record as of Third Start (PLEASE PRINT)

Name of Owner/Lessee				AGCO Licence #	HP
Contact Information	Address			Telephone (B)	
	City/Town			Telephone (H)	
	Province/State		Postal Code	Email	

MANDATORY DECLARATION

I, the undersigned, certify that I have full power and authority to execute and file this application and that each person or entity having ownership interest in the horses to which this application may apply has full knowledge of the filing of this document. I further certify that each person or entity having ownership interest in horses to which this application may apply has authorized me to complete and file this application form and that I have full power and authority to receive any requested or related documents from Ontario Racing. I understand that the Program Registry may share my contact information (including by electronic means) for the purpose of administering the Ontario Quarter Horse Racing Industry Development Program. I agree to comply with the Horse Racing Licence Act, 2015, and the Rules of Thoroughbred Racing and Rules of Quarter Horse Racing of the Alcohol and Gaming Commission of Ontario (AGCO). I further certify that information on this form is complete and correct, and I hereby assume full responsibility for the information provided. I understand that the Program Administrator reserves the right to amend, cancel or alter the Program and/or make changes to the terms, conditions, and benefits of any nature and kind whatsoever and, the signatories of this form hereby agree to be bound by such changes

Signature of Applicant (Owner) X _____ **Date** _____

SUBMIT COMPLETED FORMS TO:	Ontario Racing c/o Woodbine Mohawk Park PO Box 160, Campbellville, ON L0P 1B0 Attention: Quarter Horse Program	EMAIL: ghprogram@ontarioracing.co
-----------------------------------	---	---