

STATE HORSE RACING COMMISSION
Commonwealth of Pennsylvania
Room 304
2301 North Cameron Street
Harrisburg, PA 17110-9408

ORIGINAL APPLICATION

(Print in Ink Or Type)

THREE YEAR LICENSE FEES

OFFICE USE ONLY

License No. _____

Date Issued _____

Approved By _____

Fingerprints taken Yes _____ No _____

| | | | |
|--|--------------|--|--------------|
| <input type="checkbox"/> OFFICIAL | Fee: \$30.00 | <input type="checkbox"/> STABLE EMPLOYEE | Fee: \$15.00 |
| <input type="checkbox"/> VETERINARIAN | Fee: \$45.00 | <input type="checkbox"/> PARI-MUTUEL | Fee: \$15.00 |
| <input type="checkbox"/> FARRIER | Fee: \$45.00 | <input type="checkbox"/> TRACK EMPLOYEE (Grandstand) | Fee: \$15.00 |
| <input type="checkbox"/> JOCKEY | Fee: \$30.00 | <input type="checkbox"/> TRACK EMPLOYEE (Stable Area) | Fee: \$15.00 |
| <input type="checkbox"/> APPRENTICE JOCKEY | Fee: \$30.00 | <input type="checkbox"/> VENDOR EMPLOYEE (Grandstand) | Fee: \$15.00 |
| <input type="checkbox"/> JOCKEY AGENT | Fee: \$30.00 | <input type="checkbox"/> VENDOR/EMPLOYEE (Stable Area) | Fee: \$15.00 |
| <input type="checkbox"/> FINGERPRINTS | Fee: \$40.00 | <input type="checkbox"/> VENDOR (Grandstand) | Fee: \$45.00 |
| | | <input type="checkbox"/> VENDOR (Stable Area) | Fee: \$45.00 |

1. Name (Print) _____
Last First Middle

2. Permanent Mailing Address _____
at which service of all papers may be made upon you.

3. Email Address _____

4. Present Address _____

5. Social Security No. _____ 6. Telephone No. _____

7. Yes No United States Citizen? 8. Date of Birth _____

9. Yes No Are you a public employee, an elected public officer, or a political party officer in Pennsylvania? If yes, give details including salary, if any, position and location. _____

10. Yes No Have you been fingerprinted by the Pennsylvania Horse Racing Commission?

11. Yes No Have you ever been denied a license? Where and When? _____

12. Yes No Are you a stockholder in any racing association in Pennsylvania? _____

13. Yes No Have you or any member of your immediate family ever owned, operated or been connected with a handbook or bookmaking establishment, or been associated with bookmakers? Give all particulars. _____

14. Yes No Have you been arrested for any crime (except traffic violation), including driving while intoxicated or vehicular homicide?
Give all particulars. _____

15. Yes No Have you been convicted for any crime (except traffic violation), including driving while intoxicated or vehicular homicide?
Give all particulars. _____

16. Yes No Have you been ruled off, suspended or otherwise barred from participating in racing by any racing organization, commission, or other recognized turf authority? If so, state when, where and by whom the ruling or rulings were made and the offense or offenses charged. _____

17. Yes No Has any indictment been returned or complaint or information made against you by the United States or any State charging sale, use or possession of narcotics or controlled dangerous substances?
Give complete details and disposition. _____

18. Yes No Do you now have or will you have, employees working for you on the track? If YES, you are required by the Pennsylvania Workmen's Compensation Act to secure current insurance to provide for compensation for all such employees.

19. FARRIER ONLY — Is examination complete? Yes No Results Passed Failed

20. JOCKEY ONLY — Do you hold at the present time a license to ride from any racing organization? Yes No

Indicate which state _____

By whom are you employed? First Call _____

Second call _____

21. JOCKEY AGENT ONLY — Jockey _____

Jockey _____

(If Apprentice, Designate)

In what state and year were you first granted a Jockey Agent's license? _____

22. APPRENTICE JOCKEY ONLY — Present contract employer (Full Name and Address)

Number of winners at time of this application.

Date of first winner _____ Name of track _____

Date of fifth winner _____ Name of track _____

23. VETERINARIAN ONLY — Are you currently licensed by the Pennsylvania State Board of Veterinary Medical Examiners? Yes No

Approval of State Veterinarian _____

24. VENDOR EMPLOYEE — Name of Company and business address _____

How long have you worked for this employer? _____

25. VENDOR ONLY — Name of employer _____

Number of employees needing licenses: _____

26. Recommended by:

Name _____

Address _____

27. In making this application for a license to participate in Thoroughbred racing, it is understood that an investigative report may be made whereby information is obtained through personal interviews with third parties, such as family members, business associates, financial sources, friends, neighbors, or others with whom you are acquainted. This inquiry includes information as to your character, general reputation, personal characteristics, and mode of living, which may be applicable. You have the right to make a written request within a reasonable period of time for a complete and accurate disclosure of additional information concerning the nature and scope of the investigation.

It is further understood and agreed to that any license issued on the basis of this application is temporary only for a period of ninety (90) days and will be made permanent only after investigation and final determination of any question relative to the issuance of said license pursuant to Section 163.68 of the Pennsylvania Rules of Racing, as amended.

28. To the State Horse Racing Commission:

The undersigned hereby make application for a license in accordance with the Rules and Regulations of the State Horse Racing Commission.

By submitting this application, the undersigned does hereby agree to abide by the Rules and Regulations of the State Horse Racing Commission, the Laws of the United States of America, the Commonwealth of Pennsylvania, municipalities and other subdivisions thereof, and does hereby consent to any provisions which may be contained in any of them for the search, within the grounds of a racing association, of any premises which I may occupy or control or have the right to occupy or control and of my personal property and effects, in the seizure of any article, the having of which within such grounds may be forbidden. I further agree to accept the decision of the Racing Officials as final on any matter relating thereto, or to a race or racing.

I hereby certify that I have read the foregoing application and that every statement contained therein is true and correctly set forth, and I do hereby agree as a condition precedent to the receiving of said license that the same may at any time be revoked, cancelled, temporarily suspended or withdrawn by said State Horse Racing Commission for cause, and said license may be revoked at any time for misstatements or omissions, in the foregoing application, or for any violation of the Rules of Racing of the State Horse Racing Commission or of any other legally constituted racing authority in the United States or elsewhere.

I verify that the above statements are true and correct to the best of my knowledge, information and belief. I understand that false statements are made subject to the penalties of 18 Pa.C.S. Section 4904 relating to unsworn falsifications to authorities and may result in criminal prosecution and denial, suspension or revocation of my license.

29.

Approved — Commission Official
(Official Use Only)

30.

Signature of Applicant

31.

Date