

ADDENDUM TO MULTI-JURISDICTIONAL RACING LICENSE (Exhibit A)

Delaware Park Race Track & Slots
777 Delaware Park Blvd.
Wilmington, DE 19804
Phone (302) 994-2521

License For: 1 2 3 Years
(Circle one)

1. Name: (as listed on license application) _____
2. Owner/Trainer/Jockey (Circle one)
3. Date of Birth: _____
4. Address & Telephone Number: _____

5. Trainer's Name: _____
6. Horses are to be run under the name of: * _____
(*How ownership will appear on program)
7. Are horses leased? YES _____ NO _____
8. Is this a Partnership? YES _____ NO _____
9. Print names of Partners:
Name: _____ Signature: _____ %: _____
Name: _____ Signature: _____ %: _____
Name: _____ Signature: _____ %: _____
Name: _____ Signature: _____ %: _____
Signature of Managing Partner: _____

LIST BELOW THE FEDERAL IDENTIFICATION NUMBER USED TO REPORT PURSE INCOME TO THE I.R.S. IN LIEU OF FILLING OUT AN IRS FORM W-9.

10. Name under which income is reported to IRS: _____
(Only one name is needed)

OUT OF CHOICES BELOW, LIST ONLY ONE NUMBER ASSOCIATED WITH THE INCOME FOR THE NAME LISTED ON THE LINE ABOVE.

11. A. U.S. Social Security Number: _____
(Individual/Sole Proprietor)
B. U.S. Federal ID Number: _____
(Partnerships/Corporations/other and Individuals Racing Under Stable Name)
C. U.S. ITIN #: _____
(Individual taxpayer ID#-primarily used by people living in countries other than USA)

12. Do you authorize deductions out of your horseman's account via transfer slips from Hoofprints, Inc. and DelPark TV for photos, tapes, fines and appeals?
Yes: _____ No: _____

SIGNATURE: _____

DATE: _____

TO APPOINT AN AUTHORIZED AGENT SEE EXHIBIT "C"

FOR USE BY STATE ONLY: _____ Expiration Date
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