THE STATE HORSE RACING COMMISSION PENN NATIONAL RACE COURSE 777 HOLLYWOOD BLVD GRANTVILLE, PA 17028 PHONE: (717) 469-3223 THE STATE HORSE RACING COMMISSION PARX RACING 3255 RICHLIEU ROAD BENSALEM, PA 19020 PHONE: (267) 223-3339 THE STATE HORSE RACING COMMISSION PRESQUE ISLE DOWNS
PO BOX 10728
ERIE, PA 16514
PHONE: (814) 860-8972

THE STATE HORSE RACING COMMISSION - BUREAU OF THOROUGHBRED RACING

HR-106 (Rev. 9/16)

PLEASE SEND APPLICATION AND APPROPRIATE FEES (Refer to Fee Schedule) TO ONE OF THE RACE TRACKS LISTED AT THE TOP OF APPLICATION

CHECK OR MONEY ORDER ONLY

RENEWAL APPLICATION

(Print in Black Ink or Type) THREE YEAR LICENSE

	OFFICE USE ONLY
License No	
Date Issued	
Approved by	
Fingerprintstaker	1 Yes No

	PARTNERSHIP AND AUTHORIZED AGENT REQUIRE SEPARATE APPLICATIONS					
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la:	ssification(s) to be licensed as:					
1.	I, the undersigned, hereby make application for renewal of my to be issued to me in accordance with the terms and provisions of the Rules of Racing adopted by said Commission.	-	license,			
2.	Full Name (Print)					
	Last First Middle	•				
3. 1	Permanent Mailing Address					
	at which service of all papers may be made upon you.					
4.	Email Address					
5. F	Permanent Mailing Address					
	Street City Stale		Zip Code			
5.	Date of Birth7. Social Security No.(last 4 digits only)8. Telephone No					
		Yes □	No □			
	United States Citizen?		МОЦ			
0.	Are there any adverse rulings against you by any Racing Body?If so, give particulars:					
1.	Have you been fingerprinted by The State Horse Racing Commission?	Yes □	No □			
2.	Have you been arrested for any crime (except traffic violation) since filing last application, including driving while intoxicated or vehicular homicide?	Yes □	No □			
	If yes, give particulars:					
3.	Have you been convicted for any crime (except traffic violation) since filing last application, including driving while intoxicated or vehicular homicide?	Yes □	No 🗆			
	If yes, give particulars:					
4.	Are you a stockholder in any racing association in Pennsylvania?	Yes □	No □			
5.	Are you a public employee, an elected public officer, or a political party officer in Pennsylvania?	Yes □	No □			
	If yes, give details including salary, if any, position and location					
16.	5. OWNERS and TRAINERS ONLY — Before any owner or trainer is issued a license, he/she must comply with the provisions of the Workmen's Compensation Law of The Commonwealth of Pennsylvania. Do you have a Certificate of Insurance on file with the Commission? Yes No					
17.	If NO explain					
18.	Name of Company 19. Policy Expiration Date					

20.	OWNERS ONLY — List all horses in training owned (wholly or in part) or leased by you. (If leased, insert capital L" beside name of h Separate sheet, if necessary.)				
	(Name)	(Purchased From)	(Address)		
21.	If currently owned in partnership with other ov	vners, give names and addresses of al	ll partners.		
22.	List Trainer's Name:				
23	COLORS REGISTRATION ONLY \$15.00		ion		
24.	Jacket Color				
	Additional Jacket Description		7 7 1 1 1		
	Sleeves Color				
	Collar Color		1 1 1 I I		
29.	Horses are to run in the name of				
30.	APPRENTICE JOCKEY ONLY— Present contra	ct employer (Full Name and Address)			
31.	Number of winners at time of this application.				
22	Date of first winner	33 Name of Track			
		•			
34.	Date of fifth winner				
36.	VENDOR ONLY - Name of Company and busin	ess address			
37.	Number of employees needing licenses?				
38.	Employer's Signature				
39.	information is obtained through personal intervi neighbors, or others with whom you are acquain tics, and mode of living, which may be applicable accurate disclosure of additional information con It is further understood and agreed to that any	ews with third parties, such as family ited. This inquiry includes information as. You have the right to make a written recerning the nature and scope of the invectors issued on the basis of this applicand final determination of any question re	perstood that an investigative report may be made whereby members, business associates, financial sources, friends, to your character, general reputation, personal characterisquest within a reasonable period of time for a complete and estigation. ation is temporary only for a period of ninety (90) days and elative to the issuance of said license pursuant to Section		
40.	To The State Horse Racing Commission: The undersigned hereby make application for a li	cense in accordance with the Rules and	Regulations of The State Horse Racing Commission.		
tates any ersor fficia omn	of America, the Commonwealth of Pennsylvania, mun of them for the search, within the grounds of a racing a nal property and effects, in the seizure of any article, th is as final on any matter relating thereto, or to a race of ission.	icipalities and other subdivisions thereof, an association, of any premises which I may oc e having of which within such grounds may r racing. My signature acknowledges that I v	ions of the State Horse Racing Commission, the Laws of the United and does hereby consent to any provisions which may be contained cupy or control or have the right to occupy or control and of my be forbidden. I further agree to accept the decision of the Racing will comply with drug/alcohol testing when requested by the		
Prece or ca orse I ve	dent to the receiving of said license that the same may use, and said license may be revoked at any time for n Racing Commission or of any other legally constituted wify that the about statements are true and correct to the	e at any time be revoked, cancelled, tempora nisstatements or omissions, in the foregoing racing authority in the United States or else ne best of my knowledge, information and be	ue and correctly set forth, and I do hereby agree as a condition arily suspended or withdrawn by said State Horse Racing Commissi g application, or for any violation of the Rules of Racing of the State where. elief. I understand that false statements are made subject to the minal prosecution and denial, suspension or revocation of my licens		
41.		4			
	Signature of Applicant		Date		