

EMERGENCY PERMIT  YES  NO

Virginia Racing Commission  
10700 Horseman's Road  
New Kent, VA 23124

804-966-7412  
804-966-7422FAX  
 ARCI  
 NAPRA  
 USTA

### RENEWAL APPLICATION FOR PARTICIPANTS 20\_\_

Last Name	First Name	Middle Name
Multi-Owners or Stable Names	Type Permits	

ALL PERMIT FEES: \$10.00 EXCEPT VENDOR EMPLOYEE & GROOM \$5.00  
MULTI-OWNERS/STABLE/CORP./PARTNERSHIP FEE: \$25.00 FINGERPRINT FEE: \$37.00

#### FOR COMMISSION USE ONLY

Date Applied \_\_\_\_\_  
 Permit Number \_\_\_\_\_  
 Date Packet Mailed \_\_\_\_\_  
 Sender of Packet \_\_\_\_\_  
 Packet Given To \_\_\_\_\_  
 Application Reviewed By \_\_\_\_\_  
 Date Approved \_\_\_\_\_

Cash Payment  
 Check Payment/Check # \_\_\_\_\_  
 Prints Taken  
 Prints Not Taken

#### INFORMATION AND INSTRUCTIONS

The application shall be accompanied by a fee prescribed by the Virginia Racing Commission. The applicant shall be fingerprinted upon Making his initial application in the Commonwealth of Virginia and at least once every five years thereafter. Checks or money orders Should be made payable to the Virginia Racing Commission. All questions must be answered and the application signed by the applicant.

Permanent Mailing Address _____ _____ City State Zip Maiden Name _____ Employer _____ U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No If no, citizen of _____ Immigration # _____ Person to notify in Emergency: _____ Relationship _____ Address _____ Street City State Zip Telephone Number _____	Social Security # _____ FEIN Number _____ U.S.T.A. Number _____ Date of Birth _____ Birth Place _____ Telephone: Home _____ Business _____ SEX: <input type="checkbox"/> Male <input type="checkbox"/> Female WEIGHT _____ HEIGHT _____ HAIR COLOR _____ EYES _____	<u>OWNER AND TRAINER</u> Number of horses in training in Virginia _____ Number of employees working in Virginia _____ Company name _____ Policy Number _____ Name of Policyholder _____
		<u>ASSISTANT TRAINER</u> Assistant to trainer _____ Number of horses in your care _____
		<u>JOCKEYS AND APPRENTICE JOCKEYS</u> Name of Agent _____
		<u>JOCKEY AGENTS</u> 1. Jockey's Signature _____ 2. Jockey's Signature _____
CURRENT LICENSE 20 _____ TYPE LICENSE _____ NAME OF STATES _____		

Have you been ruled off, suspended or otherwise debarred or denied a license or permit in any other racing jurisdiction since you last received a permit in Virginia?  Yes  No

If yes, explain \_\_\_\_\_  
\_\_\_\_\_

Have you been arrested or has a criminal summons been issued against you since you last received a permit in Virginia?  Yes  No

If yes, explain \_\_\_\_\_  
\_\_\_\_\_

List all horses in training owned wholly or in part by you. If leased, please designate and all leases must be notarized.

List all persons, corporations or other legal entities holding any interest in the below horses.

<u>Name</u>	<u>Address</u>	<u>Horse</u>	<u>Percent Interest</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I am knowledgeable about the regulations of the Virginia Racing Commission, and I agree to abide by the regulations of the commission as well as the rulings of the stewards, unless reversed or modified by the commission.

By submitting this application, I hereby irrevocably consent to a search and to the seizure of any drugs, stimulants, narcotics, hypodermic syringes, or other similar devices, and any batteries, which could be used to affect the speed or action of a horse. I also hereby irrevocably consent to the right of commission personnel to enter into, or upon buildings, stables, rooms, autos, or other places within the enclosure, as defined by the regulations of the commission, to examine them, and to inspect and examine my personal property and effects. I recognize that by refusing to consent to such searches and seizures that I am subject to disciplinary action.

I understand that the Virginia Racing Commission will keep my fingerprints taken in connection with this application on file for possible later use for such purposes as renewal of my Virginia Racing License or any disciplinary action that may be taken with regard to that license, and I hereby authorize the Virginia Racing Commission to do so.

I hereby certify that I have read this application and affirm that every statement contained here in is true and correct to the best of my knowledge and belief. I do hereby agree that my permit may be revoked at any time for misstatements or omissions in this application.

I hereby agree to be subject to the subpoena powers of the Virginia Racing Commission or a written request issued in lieu of a subpoena and provide the commission with any and all information or document, which it may request. This agreement shall extend to anything, which relates to any matter, which is the subject of a commission hearing or investigation.

I hereby certify that I read this application and that the applicant is my employee. I also hereby certify that I will be responsible for the actions of my assistant as they relate to racing matters.

\_\_\_\_\_  
Signature of Supervisor of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date