

Virginia Racing Commission (VRC)
5707 Huntsman Road, Suite 201-B
Richmond, VA 23250
www.vrc.virginia.gov



804-966-7415
email application to:
VRCLicense@vrc.virginia.gov

BREED (Horsemen Only): Harness Thoroughbred Steeplechase

LICENSE TYPE: Owner Trainer Jockey Driver Rider Stable/LLC/Estate Exercise Rider Assistant Trainer Groom

Licensee Employee VEA Employee Gold Cup Employee Vendor Employee Other _____

ACCESS TYPE (Licensee Employees Only): Front side Backside All Access **Approved By:** _____

APPLICANT'S NAME _____
Last First Middle (Jr, Sr., etc.)

Other Names (maiden/other) _____

DATE OF BIRTH _____ **AGE** _____ **PLACE OF BIRTH (State or Country)** _____

Are you a Citizen or Naturalized Citizen of the United States? Yes No If no, what country? _____ Immigration # _____

RACE _____ **SEX** _____ **EYE COLOR** _____ **HAIR COLOR** _____ **HEIGHT** _____ **WEIGHT** _____

PERMANENT MAILING ADDRESS: It is the sole responsibility of the licensee to notify the Racing Commission of a change in mailing address.

Street or P.O. Box Apt/Suite

City State/Province Postal Zip/Country

PHONE NUMBER _____ **E-Mail** _____

All license applicants are required to provide answers to the criminal history background questions. Intentionally or recklessly providing false information concerning criminal history background will result in an invalid license. Any Outstanding Warrants found during the background investigation will result in an invalid license. Fingerprints are sent to the State Police and FBI as part of our background investigation.

1. Have you **EVER** had a racing license denied, suspended, or revoked? Yes No
2. Have you **EVER** plead guilty or no contest, been found guilty, convicted, or fined for any criminal offense, either a felony or misdemeanor, including driving under the influence of drugs or alcohol? Yes No
3. Are any criminal charges or complaints pending against you? Yes No

IF YOU ANSWERED "YES" TO ANY OF THE ABOVE QUESTIONS – PLEASE PROVIDE AN EXPLANATION BELOW AND ATTACH ADDITIONAL PAGES AS NECESSARY

Charges (s): _____

Year arrested/charged: _____

Agency that arrested/charged you: _____

Court where you appeared: _____

Disposition & Date (Jail, Fine, Probation, Dismissed): _____

Severity (Misdemeanor/Felony): _____

OWNERS – PLEASE PROVIDE THE FOLLOWING INFORMATION

How is ownership listed on the official race program? _____

Who is your Virginia licensed trainer? _____

Do you intend to register an authorized agent? Yes No If yes, name _____

Do you race under a stable/LLC/Estate name or any other names? Yes (choose "License Type" on page 1) No

If yes, what name? _____

List the names of partners with an interest of five percent (5%) or more of the Stable/LLC/Estate name

	% Owned		% Owned

List the names of horses that you plan to race (attach additional pages if necessary):

Name of Horse(s)	% Owned	Name(s) of Other Owner(s) or Anyone With an Interest in the Named Horse	% Owned

TRAINERS – PLEASE PROVIDE THE FOLLOWING INFORMATION

List the names of owners you are training for in Virginia (attach additional pages if necessary):

Name of Owner (Last, First, Middle Initial)	Address (City, State, Zip Code, Country)

List the names of grooms working for you in Virginia (attach additional pages if necessary):

Name of Groom (Last, First, Middle Initial)	Address (City, State, Zip Code, Country)

OWNERS/TRAINERS/JOCKEYS/DRIVERS – PLEASE PROVIDE THE FOLLOWING INFORMATION

Please provide your HISA # _____ or USTA # _____

ALL APPLICANTS – PLEASE READ CAREFULLY BEFORE SIGNING

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 irrevocably consent to a search and seizure of any drugs, stimulants, narcotics, hypodermic syringes, or other similar devices, and any batteries, which could be used to affect the speed of action of any horses. I also hereby irrevocably consent to the right of Commission personnel to enter late, 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 the consent to such searches and seizures that I am subject to disciplinary action. I hereby certify that I have read this application and affirm that every statement here is true and correct to the best of my knowledge and belief. I do hereby agree that my permit may considered invalid 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 documentation 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.

UNDER 18 YEARS OF AGE (if applicable)

By signing, I give my permission for licensure of this minor and assume full responsibility, including financial responsibility, for such licensure.

Signature of parent / legal guardian: _____ **Relation:** _____

GROOMS (If you are not on the Trainer's list of grooms, the Trainer must sign your application)

Trainer Name (Print) _____ **Trainer Signature** _____

Signature of Applicant _____ **Date** _____

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FOR RACING COMMISSION USE ONLY:

Application Reviewed (initial) _____ Interviewed – if needed (initial/date) _____ Approved Denied

Processed by (initial) _____ Fee _____ Date _____

Fingerprints Submitted Yes No Fingerprint Status _____

Cash Check # _____ Credit Card (last four #) _____ Billing _____