

LICENSE APPLICATION

STATE OF DELAWARE
HARNESS RACING COMMISSION
DEPARTMENT OF AGRICULTURE
2320 S. DUPONT HIGHWAY
DOVER, DELAWARE 19901

For Information (during live racing) call:
Dover Downs: 302-674-4600, ask for licensing office
Harrington Raceway: 302-398-7223, ask for licensing office

EXPIRATION DATES

A-D 12-31
E-K 3-31
L-Q 6-30
R-Z 9-30

MONEY ORDER _____
CHECK _____
CASH _____
CREDIT CARD _____

APPROVED BY:

FOR YEAR 20 _____

Please Print YEAR & JURISDICTION LAST FINGERPRINTED _____

TYPE OF LICENSE APPLIED FOR:	License Fee:
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1. Applicant Name _____
2. Permanent Address _____
3. Local Address _____
4. Telephone: Home _____ Cell _____ Work _____
5. Spouse's Full Name: _____
6. Date of Birth ____/____/____ Place of Birth _____

7.	SEX	WEIGHT	HEIGHT	COLOR HAIR	COLOR EYES	OFF-TRACK OCCUP.	SOC. SEC. NUMBER

8. Are you a member of the United States Trotting Association? Member Number: _____
Expiration Date: _____
9. Grooms or Assistant Trainers: Name of Employer or Stable: _____

Employer Signature: _____

10. List all Jurisdictions in which you have been licensed in the last 3 years:
Use additional paper if necessary.

JURISDICTION	DATES	TYPE OF LICENSE

Are you currently in good standing in each of these jurisdictions?
YES _____ NO _____

Do you have any complaints (charges) pending in any of these jurisdictions?
YES _____ NO _____

11. In the last ten years, has your license (or your spouse's license) been denied, suspended (7 days or more), disapproved, or revoked or is a complaint pending in any jurisdiction? YES NO If yes, please provide details.

12. Have you ever been fined \$500 or more or been ejected or denied admission to any racetrack by any racing official or commission? YES NO If yes, please provide details:

13. IN THE LAST TEN YEARS HAVE YOU BEEN ARRESTED OR CONVICTED OR SERVED TIME ON ANY CRIMINAL CHARGE OR SERIOUS TRAFFIC OFFENSE, INCLUDING DUI? IF SO, PROVIDE ALL INFORMATION CONCERNING THE CHARGE(S), INCLUDING DATE, LOCATION, AND FINAL DISPOSITION. (All arrests must be reported whether dismissed or whether you were convicted or received a suspended sentence.)

14. Are there now any indictments or complaints pending against you (or your spouse) for any public offense or are you currently on parole or probation? YES NO If yes, please provide details:

15. Have you ever been involved in bookmaking or other illegal gambling or associated with anyone so involved? YES NO If yes, please attach particulars

16. Do you have or will you have employees working for you on the track? If yes, you are required by the Delaware Workmen's Compensation Act to secure current insurance to provide for compensation of all such employees. YES NO List Company: _____

17. Please list all horses you currently own or lease and provide the trainer, complete ownership of each horse, and where each horse is stabled. Attach additional sheet if necessary.

HORSE	OWNER(S)	TRAINER	LOCATION

18. If you are under 18 years of age, working papers or education certificate must be submitted with this application. Fill in the following:

School District

Certificate Number

ANY PERSONS MAKING ANY FALSE, UNTRUE, OR MISLEADING STATEMENT ON AN APPLICATION FOR A LICENSE MAY BE DENIED A LICENSE OR MAY BE SUSPENDED &/OR FINED OR HAVE LICENSE REVOKED.

I hereby certify that I am not under suspension or in bad standing with any racing jurisdiction and that I have read the application and know its contents and that every statement contained herein is true and correct.

Signature of Applicant

Signature of Parent or Legal Guardian indicating
Acceptance of full responsibility for this applicant for
For license when applicant is under 18 years of age.