

RCI No. _____
Date: _____
License No. _____

Fee: \$50.00

APPLICATION TO REGISTER STABLE NAME

To the IDAHO STATE RACING COMMISSION:

The undersigned hereby makes application to register the following STABLE NAME in accordance with the terms and provisions of the Rules and Regulations of the IDAHO STATE RACING COMMISSION;

STABLE NAME _____

ADDRESS _____

FEDERAL ID # OR SOCIAL SECURITY # _____ (Required)
(Please Note: Name and Social Security Number or Federal Tax ID must match in order to receive owner/breeder awards.)

EACH OWNER, PART OWNER OR LESSEE MUST SECURE AN OWNERS' LICENSE

Name	SSN#	Current Lic#	Date of Birth
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

At the time of making this application, are any of the above named individuals, corporations, or partnerships under suspension, set down, ruled off, or otherwise debarred from racing by any racing organization, association, commission, or other recognized Turf Authority in the United States or elsewhere? Yes or No

If so, state when, where and by whom the ruling or rulings were made, and the offense or offenses charged (use separate sheet if necessary).

Date of Application _____, 20_____.

(Signature) _____.