

THE JOCKEY CLUB

P.O. Box 90
Jamaica, NY 11417
(718) 641-4700, Ext. 4301

PLEASE TYPE OR PRINT IN INK

STABLE NAME FORM

This form must be used to report
a stable name for racing purposes.
Renewable Dec. 31 of every year
FEE: \$100.00 ANNUALLY

DIRECTIONS FOR REPORTING A STABLE NAME:

1. Fill out this form completely and accurately.
2. A stable name may be registered with The Jockey Club as required by the New York State Racing and Wagering Board by completing the appropriate form and paying the required fee; and is subject to review by The Jockey Club to ensure the name to be registered will not deceive or improperly mislead the public, or would otherwise be contrary to the best interests of racing. (NYSRWB 4026.15)
3. A stable name can have a maximum of 35 characters, including punctuation and spaces; and generally should have "stable", "farm", "stud", "ranch", or the appropriate multiple ownership entity (Partnership, Inc, LLP, LLC) designation as a suffix. The word "racing" can be used in a stable name.
4. An individual cannot have more than one registered stable name at the same time. (NYSRWB 4026.16)
5. A stable name must be registered in the name of only one person, either the sole owner, or managing partner. (NYSRWB 4026.17)
6. A stable name may be changed by registering a new stable name. (NYSRWB 4026.18)
7. A stable name must be unique and distinguishable from all other registered stable names; and cannot contain the name of a Thoroughbred or another owner of race horses. (NYSRWB 4026.19)
8. A stable name may be cancelled upon written notification to The Jockey Club. (NYSRWB 4026.20)
9. No licensed trainer of race horses shall register a stable name. (NYSRWB 4026.21)
10. Return the completed form and fee to: The Jockey Club, P.O. Box 90, Jamaica NY, 11417.

I hereby apply for the registration of the following STABLE NAME for the year 200_____

I certify that the Stable Name requested above has no connection with any business, nor is it used in any way for the advertisement of any product. The stable name is derived from:

NAME _____

ADDRESS: _____

CITY _____ STATE _____ ZIP _____

TELEPHONE () _____ - _____ E-MAIL ADDRESS _____

Signature and Certification:

The undersigned certifies that he or she is an owner of the above referenced stable; that the under-signed has full power and authority to execute and file this report; to receive any requested documents from The Jockey Club, and all information supplied on this form is complete and accurate.

Signature _____ Date _____, 20_____

Print name _____ TJC Office File Number _____