

20 _____

KENTUCKY HORSE RACING AUTHORITY

Kentucky Horse Park
4063 Iron Works Pkwy.
Lexington, Kentucky 40511

859-246-2052

AUTHORIZED AGENT

(This application must be notarized)

FEE, \$25.00 ANNUALLY

_____ 20 _____

To the Kentucky Horse Racing Authority and all racing associations
under its jurisdiction:

I have this day appointed _____

SS# _____ to act for me for the year 20 _____
in all matters pertaining to the racing of my horses under the Rules of Racing
as adopted by the Kentucky Horse Racing Authority.

To CLAIM HORSES for MY ACCOUNT and to DRAW MONEY from
MY HORSE ACCOUNT with NO LIMITATIONS unless stated below:

EXPIRES DECEMBER 31, 20 _____

(Signature)

(Printed Name)

Subscribed and sworn to before me this _____ day of _____
in the year _____.

(Notary Public)

-ORIGINAL-

RETURN TO KHRC

(over)

KHRC file copy

FORM A8
(Rev. 1/00)



If AGENT is not licensed in Kentucky in some other capacity (Owner, Trainer, etc.), please furnish the following information:

Name _____

Permanent Address _____

Date of Birth _____ Social Security No. _____

Year and capacity previously licensed in Kentucky _____

Currently licensed as _____

in states of _____

Have you, or your spouse, ever been fined, suspended, or denied a license by any Racing Commission or the Stewards at any race track? If so, furnish particulars:

I understand that participation in racing in Kentucky is a privilege, not a right, that the license issued pursuant to this application is subject to conditions precedent as set out in the Kentucky Rules of Racing, and that my failure to comply therewith shall be grounds for immediate voidance or revocation of such license. By acceptance of said license, I agree to abide by the Kentucky Rules of Racing and rulings or decisions of the Stewards with the knowledge that rulings or decisions of the Stewards shall remain in force until reversed or modified only by the Kentucky Horse Racing Authority.

I hereby certify that I have read and understand the foregoing and affirm every statement made by me in this application as being complete and true, and in the event any such statement shall become incorrect or untrue, I shall immediately notify the Kentucky Horse Racing Authority of such change.

Signature of Agent