License No._____

◯ Thoroughbred ◯ Standardbred

FEE: $25.00

SUITE 5-700
100 WEST RANDOLPH
CHICAGO, IL 60601

ILLINOIS RACING BOARD

Authority to Act as Authorized Agent

_____ being first duly sworn upon oath depose and say that I
(Name of Principal)

Have this day appointed _____
(Name of Agent)

Address _____
(Street No.) (City) (State) (Zip)

to act as my Authorized Agent for the year 20_____, in all matters pertaining to the racing of my horses under the rules, regulations and conditions of the Illinois Racing Board and statutes and laws of said State of Illinois, and I do hereby authorize my said Agent to act for me subject to the following limitations (state limitations, if any):

_____

_____

_____

It is hereby understood that I assume full responsibility for the act of my said Authorized Agent in connection with this authority.

Signed_____

Signed_____

Signed_____

Signed_____

Signed_____

Subscribed and sworn before me

this_____day of _____, 20_____

_____
(Notary Public)

Note: Original must be filed with the Illinois Racing Board. If a partnership, **ALL** members of partnership must sign this Authorization.

This Authorization does not permit the authorized agent to sign owner's application for license, as this is prohibited by the Rules & Regulations of the Illinois Racing Board.
This Authorization must be accompanied by an application for an Authorized Agent's License, signed by the authorized agent, unless the authorized agent is licensed otherwise by the Illinois Racing Board.

WE, THE UNDERSIGNED Stewards, appointed by the Illinois Racing Board, do hereby recommend to the Illinois Racing Board that_____be granted a license as an authorized agent for the year 20_____.

_____ _____ _____

I do herey DISSENT to the above recommendation, and vote against the recommendation that such license be granted.

_____ _____ _____