

FOR BOARD USE ONLY
License Number: _____
Date Issued: _____



Suite 5-700
100 W. Randolph
Chicago, IL 60601

ILLINOIS RACING BOARD

License Clerk _____
Track _____

CLAIMING AUTHORIZATION FORM

Upon claiming, this form serves
As your License Application

FEE: \$25

THOROUGHBRED STANDARDBRED

ALL QUESTIONS MUST BE ANSWERED

1. APPLICANT'S NAME – First Name and Initial _____ Last Name _____ (Maiden Name) _____						2. SOCIAL SECURITY NUMBER _____																			
3. PRESENT HOME ADDRESS _____ Number and Street or Rural Route _____ City, town or post office, and State _____ Postal Zip _____						4. TELEPHONE (_____) _____ Home (_____) _____ Business																			
5. DATE OF BIRTH _____	6. PLACE OF BIRTH _____	7. SEX M F	8. HEIGHT Ft. In.	9. WEIGHT Lbs.	10. HAIR _____	11. EYES _____	12. MARITAL STATUS Married Single																		
13. FULL NAME OF SPOUSE _____						14. SPOUSE MAIDEN NAME _____																			
15. LIST ALL OTHER NAMES YOU HAVE USE, INCLUDING NICKNAMES, IF YOU HAVE USED ANY SURNAME OTHER THAN YOUR TRUE NAME, DURING WHAT PERIOD AND UNDER WHAT CIRCUMSTANCES WERE THESE NAMES USED. _____ _____																									
16. DRIVER'S LICENSE INFORMATION State _____ Lic. No. _____				17. VEHICLE REGISTRATION INFORMATION Make _____ Model _____ Lic. No. _____ Make _____ Model _____ Lic. No. _____																					
18. GIVE COMPLETE RECORD OF YOUR EMPLOYMENT DURING THE PAST 5 YEARS. IF SELF-EMPLOYED, SO INDICATE, AND GIVE NAME, ADDRESS AND TYPE OF BUSINESS. IF NOT EMPLOYED OR ENGAGED IN ANY OCCUPATION, CHECK HERE _____ . <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:15%;">Dates</th> <th style="width:40%;">Name and Address of Employer</th> <th style="width:25%;">Type of Business</th> <th style="width:20%;">Position Held</th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </tbody> </table>								Dates	Name and Address of Employer	Type of Business	Position Held	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____		
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19. LIST STATE RACING LICENSES ISSUED TO YOU LAST YEAR. IF NOT LICENSED LAST YEAR CHECK HERE _____ . <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:10%;">State</th> <th style="width:20%;">License Type</th> <th style="width:20%;">License No.</th> <th style="width:10%;">State</th> <th style="width:20%;">License Type</th> <th style="width:20%;">License No.</th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </tbody> </table>								State	License Type	License No.	State	License Type	License No.	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
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THIS SPACE INTENTIONALLY LEFT BLANK

20. Have you ever been licensed in any state under any other name? If yes, list (in the space provided below) the names and ages used and identify the state and the year.	Yes	No
21. Has your license (or your wife's or husband's license, if any) ever been denied, suspended or revoked, or are you currently the subject of any violations in this or any other racing jurisdiction with the exception of routine riding of seven days or less (jockeys only)?	Yes	No
22. Have you ever been found guilty of any fraud or misrepresentation in connection racing or breeding?	Yes	No
23. Have you ever been ruled off or denied the privilege of a racetrack, or been suspended or discharged from any racetrack by any racing official, association or commission?	Yes	No
24. Have you or any member of your immediate family (a) ever been employed by or associated with a bookmaker or any gambling or illegal establishment, or (b) ever owned or operated a handbook or other illegal establishment?	Yes	No
25. Have you ever had any permit or license of any type denied, suspended or revoked by any Federal, State, or local governmental agency?	Yes	No
26. Have you ever plead guilty, plead nolo contendere, been found guilty, or been convicted, or forfeited bail or been fined for any criminal offense, either felony or misdemeanor (except traffic violations other than driving under the influence of intoxicating liquor/drugs)?	Yes	No
27. Are you now under charges for any offense against the law (except minor traffic violations)?	Yes	No
If you answered YES to any of the above statements, provide additional details:		

Name of Trainer _____ License Expiration Date _____

The Undersigned, a trainer licensed by the Illinois Racing Board, confirms that he has agreed to take charge of, care for and train any horse claimed by the above-named applicant pursuant to this Authorization.

Trainer Signature: _____

NOTE: Both applicant and trainer are required to notify the stewards promptly in writing if the above agreement to train is terminated before a horse is successfully claimed.

NAME OF HORSE CLAIMED: _____

IMPORTANT: The Board may refuse to issue or may suspend the occupation license of any person who fails to file a return or to pay the tax, penalty or interest, as required by any tax Act administered by the Illinois Department of Revenue until such time as the requirements of any such tax Act are satisfied.

Applicant's Signature: _____ U.S.T.A No. (if a Member) _____

Subscribed and Sworn to before me this _____ Day of _____ 20_____

NOTARY PUBLIC

WE, THE UNDERSIGNED, Members of the LICENSE COMMITTEE created by the Illinois Racing Board do hereby recommend to the Illinois Racing Board that a _____ License be granted to the Applicant for the year 20 _____.

I do hereby DISSENT to the above recommendation, and vote against the recommendation that such License be granted by the Illinois Racing Board.

ILLINOIS RACING BOARD
SUITE 5-700
100 WEST RANDOLPH
CHICAGO, IL 60601



TEL: 312-814-2600
TDD: 312-814-5039
FAX: 312-814-5062

ILLINOIS RACING BOARD
CLAIMING AUTHORIZATION
Part 2

Date of Issue

_____ is hereby authorized to claim any horse entered in a claiming race at a meeting licensed by the Illinois Racing Board. Such claim shall be made in accordance with the Rules of the Illinois Racing Board and of the licensee conducting the meeting at which such claim is made.

This Authorization shall be filed together with any claim and shall be returned to the holder hereof if such claim is not successful.

This Authorization shall expire on _____, 20 _____ or upon holder's becoming entitled to claim as an owner, or successfully claiming a horse; whichever first occurs.

Trainer _____

IRB License No. _____

WE, THE UNDERSIGNED, Members of the LICENSE COMMITTEE created by the Illinois Racing Board do hereby recommend to the Illinois Racing Board that a _____ License be granted to the Applicant for the year 20 _____.

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