

STATE OF CALIFORNIA
CALIFORNIA HORSE RACING BOARD

CHR-4 (REV. 10/04/95)

APPLICATION FOR LICENSE

Please Print in Ink or Type

NO:

DATE:

ISSUED AT:

Last Name First Name Middle Name

(Business Address) No. or Box Street City State Zip

Business phone Name of spouse (Husband/Wife)

Height: Weight: Hair: Eyes: Sex:

Place of birth: Birth Date month / day / year

Type of license applied for TB QH HH App. Arabian

Were you licensed by the California Horse Racing Board last year? NO YES

Previous License No. PRESENT OR ATTACH PREVIOUS YEARS' LICENSE FOR RENEWAL

INFORMATION PROVIDED ABOVE IS PUBLIC PURSUANT TO THE CALIFORNIA PUBLIC RECORDS ACT (Government Code Section 6250 et seq.)

- LICENSE FEE
- \$250
- Open Claim Cert./License
- \$200
- Off., Dir., Partner, 5% Stock holder of Rac. Assn., Simulcast Srv. Supplier, Totalizator Company
- \$150
- Horse Owner, Trainer, Asst. Trainer, Jockey, App. Jockey, Driver, Jockey Agt., Bidstk Agt., Veterinarian, Official, Manager, Racing Official, Steward.
- \$75
- PM Employee, Valet, Asst. to Official, Asst. Gen. Mgr., Pony Rider, Vendor, Vendor Emp., Exercise Rider, Horseshoer, Stable Agt., Foreman, Clerical, Security, Misc. Classes.
- \$35
- Groom, Stbl. Emp., Stbl. Asst.
- \$34
- Assessment - Reciprocity

1. Have you ever been convicted of an offense by a court? YES NO

Include offenses to which you pled nolo contendere or which were dismissed per Sec. 1203.4 P.C. Exclude offenses in Juvenile Court or under the Youth Offenders Law, sealed per Sec. 781 W.I.C., specified in Sec. 11361.5 H&S, or traffic offenses where the fine was \$300 or less.
2. Are you presently licensed to participate in racing by any other Racing Commission? YES NO
 If so, give State: _____
3. Has any of your license(s) to participate in racing EVER been revoked or suspended for more than 10 days? YES NO
4. Have you EVER used another name in obtaining a license from any Racing Commission? YES NO
5. (Owners, Trainers, Jockeys, Drivers ONLY) Do you intend to participate in the ARCI Reciprocity Program? YES NO
 If so, give State(s): _____
6. Are you presently employed by a Racing Association or Trainer? YES NO
 If so, give name: _____

I hereby make application for license to be issued in accordance with the terms and provisions of the Rules and Regulations of the California Horse Racing Board. I certify under penalty of perjury that the statements and answers I have made in the application are true and correct.

Signature _____ Date of Application _____

Reviewed by	_____
F.P.	_____
SPECIAL CODE	_____
SUBSTANCE ABUSE	_____
SEMINAR	_____

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INFORMATION LISTED BELOW WILL BE KEPT CONFIDENTIAL

Residence Address City State Zip

Phone Soc. Sec. (or FIN) Driver's License # State

Disclosure of Social Security Number is voluntary. The Social Security Number will be used to identify personal records which may be required during the background investigation. (Authority: Business and Professions Code Section 19440, Public Law 93-579, Section 7.)



OSP 99 18433