



Oregon Racing Commission

Application for Racing License

Mark an "X" next to the license(s) you are applying for

<input type="checkbox"/>	Apprentice Jockey
<input type="checkbox"/>	Assistant Trainer
<input type="checkbox"/>	Authorized Agent
<input type="checkbox"/>	Blacksmith, Farrier
<input type="checkbox"/>	Groom
<input type="checkbox"/>	Exercise Person
<input type="checkbox"/>	Jockey

<input type="checkbox"/>	Jockey Agent
<input type="checkbox"/>	Maintenance Employee
<input type="checkbox"/>	Mutuel Employee
<input type="checkbox"/>	Mutuel Manager
<input type="checkbox"/>	Owner (Horse)
<input type="checkbox"/>	Owner (Temp. or Claim)
<input type="checkbox"/>	Pony Rider

<input type="checkbox"/>	Stable (Partnership)
<input type="checkbox"/>	Trainer
<input type="checkbox"/>	Vendor
<input type="checkbox"/>	Veterinarian
<input type="checkbox"/>	Veterinarian Assistant
<input type="checkbox"/>	Other:
<input type="checkbox"/>	Other:

Please Note: Your first license category is \$60.00. The maximum amount for additional licenses is \$30.00.

Employer's Name:	Trainer's Name:
Authorized Agent For:	
Trainer / Outrider / Supervisor / Signature (If Applicable For Approval):	

Last Name:	First Name:	Middle Name: (No initials)	
Social Security Number (Required):	Birth Date:	U.S. Citizen? ()Yes ()No	
Place of Birth:	Immigration Number:		
Sex: Male () Female ()	Race:	Aliases:	
Eye Color:	Hair Color:	Driver's Lic.#:	State Lic.Issued:
Home Phone:	Cell Phone:	Height:	Weight:
Are you Married? ()Yes ()No		If Yes, Spouse's Full Name:	
Emergency Contact Name:	Relationship:	Contact Number:	

Permanent Address:		
Post Office Box (if applicable):		
City	State	Zip Code
Local Address:		
Post Office Box (if applicable):		
City	State	Zip Code

Personal (Background) Information:

(You must answer all these questions with a "Yes" or a "No")

If any of your answers are "Yes"- You MUST complete <Section A> on page 3 of this application with an explanation.

1.	Has your racing license ever been denied, suspended, or revoked or is a complaint pending in any	()Yes	()No
2.	Have you ever been fined \$100 or more, discharged, expelled or ejected from any race track by any racing official or Commission?	()Yes	()No
3.	Have you ever had any permit or license denied, suspended, or revoked by any federal, state or local government agency?	()Yes	()No
4.	Have you ever been arrested and/or convicted for any crime (except minor traffic violations)?	()Yes	()No
5.	Are there any indictments or complaints pending against you for any public offense?	()Yes	()No
6.	Are you currently on parole or probation?	()Yes	()No
7.	Are there any outstanding court-imposed civil judgments against you?	()Yes	()No
8.	Are you under an obligation to pay child support in any jurisdiction?	()Yes	()No

Section A

(List "ALL" Background Criminal History and Race Track Fines / Suspensions Below)

Date	Location / Track Name	Nature of Violation Charge	Fine / Suspension / Disposition	Jurisdiction

Use for Additional Comments:

ALL APPLICANTS MUST READ THE FOLLOWING – SIGN AND DATE BELOW

In making this application for a license to participate in racing, it is understood that an investigative report may be made whereby information is made through personal interviews with third parties, such as family members, business associates, financial sources, friends, neighbors, or others with whom you are acquainted. This inquiry includes information as to your character, general reputation, personal characteristics, which may be applicable. You have the right to make a written request within a reasonable period of time for a complete and accurate disclosure of additional information concerning the nature and scope of the investigation.

I expressly agree to the subject to subpoena powers of the authorized regulatory agency or written request issued in lieu of a subpoena and to provide the agency with any and all such information or documents which it may so request. This agreement shall extend to anything which relates to any matter which is subject of an agency or hearing or investigation.

I understand that participation in racing is a privilege, not a right, that any license issued pursuant to this form is subject to condition precedent as set out in the Rules of Racing, and that my failure to comply therewith can be grounds for immediate voidance or revocation of such license. Upon approval of this license, I agree to abide by all 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 authorized regulatory agency.

By submitting this application, I the undersigned, to hereby (i) agree to abide by the rules and regulations of the pari-mutuel regulatory agency of the State of Oregon, Oregon Statutes 462.010 – 462.990, the laws of the United States of America, Canada, all state / provincial governments, municipalities and other sub-divisions thereof; and (ii) agree to abide by any provision regarding search, within the grounds of a racetrack or racing association, of any premises or vehicle which I may occupy or control or have the right to occupy or control and my person, property and effects and in the seizure of any article the having of which may be forbidden. All submitted applications are considered temporary until approved by a Steward.

I hereby certify that I have read the foregoing and that every statement made by me in this application as being complete and true.

Applicant Signature:	Date:
Steward or Regulatory Agency Representative Approval:	Date:

FAX or mail this application to:
Oregon Racing Commission, 800 NE Oregon St., Suite 310, Portland, Oregon 97232
Licensing Phone: (503) 285-9144, ext. 222 ■ Investigators' Phone: (503) 737-1079 ■ FAX: (503) 737-1010

**Oregon Racing Commission Application
Supplemental Criminal History Information**

Applicant's Full Name: _____ Social Security Number: _____

Date of Offense:	Arresting Agency:	Location:	Charge:
Description of Offense:			
Disposition:			

Date of Offense:	Arresting Agency:	Location:	Charge:
Description of Offense:			
Disposition:			

Date of Offense:	Arresting Agency:	Location:	Charge:
Description of Offense:			
Disposition:			

Date of Offense:	Arresting Agency:	Location:	Charge:
Description of Offense:			
Disposition:			

DISCLOSURE: Failure to submit or disclose accurately "ALL" criminal history can be grounds for a fine, suspension and/or license denial. Failure to sign or return this form can be grounds for denial of a license and/or a fine. If you need help filling out this criminal history form, please contact one of our investigators.

Applicant Signature (Required): _____ **Date:** _____

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