

TEMPORARY OWNER'S LICENSE APPLICATION

KENTUCKY HORSE RACING COMMISSION
4063 IRON WORKS PARKWAY, BLDG B
LEXINGTON, KY 40511
TOLLFREE 1-877-4KY-RACE (1-877-459-7223)
859-246-2052 PHONE 859-246-2039 FAX
WEBSITE: www.khrc.ky.gov

For KHRC Use only

License # _____
License Clerk _____
Check # _____ Cash _____
Credit Card _____
Steward/Security Approval (if required)

THOROUGHBRED/STANDARD BRED/QUARTER HORSE

DATE OF APPLICATION _____ DATE OF EXPIRATION _____

Last Name		First Name Mr. ___Mrs. ___Ms. ___ Other ___		M.I.	Social Security #		
Mailing Address			City	State	Zip Code	Date of Birth	
Home Phone ()	Work Phone ()	Cell Phone ()		Email			
Trainer		Sex	Height	Weight	Hair	Eyes	Marital Status

Trainer's Signature _____

This permit is valid for racing purposes only and for a period of 30 days. Completion of the regular licensing procedure is mandatory. Failure to complete the license procedure may result in a fine and/or license suspension for both the owner and trainer.

ADD \$7.00 FOR CREDIT CARD PROCESSING FEE

If paying by credit card I authorize KHRC to charge my account for the appropriate license fee plus a \$7.00 processing fee.

CREDIT CARD INFORMATION: _____ Master Card _____ Visa _____ American Express (Check One)

Credit card # _____

Expiration Date _____

Billing address for this card _____

Cardholder's name (as it appears on the card) _____

By my signature, I agree to pay the license fee for this application to KHRC according to my cardholder agreement

_____ Signature _____ Date

