

Horse Racing Branch License Application

Horsemen Application
INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED. INCORRECT ANSWERS MAY LEAD TO REFUSAL OR CANCELLATION OF

FOR AUTHORITY USE ONLY																	
License No Issued By Issue Date		te	Original			ous Year		Fee	Receipt No		Expiry Date		Approve		ed By		
I give my p	permission to	SLGA to	mak	e my info	rma	tion av	vailable	e to H	orse	Racin	g Organiz	atio	ns: YE	ES	NO	0	
		PRINT C	OR T	YPE ANS	WE	RS TO	ALL (OF TH	E F	OLLO	WING QU	JEST	TONS				
Select Breed (Select Licen							me guaranto						
Quarter Horse Thoroughbred Jockey Agent				ıt	Exe	-				Apprentice Jockey Owner Spor							
1				Pony Rider Hot Walker							OWI	vner Spouse Family Drivers License #			ıy		
Social Insurance # Hospitalization/Heal					Healt	h Insura	urance # Specify Validation Location Drive				:s License #						
Legal Name (F	irst, Middle, Las	st)								Da	ate of Birth	D	AY	MO	NTH	YEAR	2
Permanent Hor	me Address					City	Province Co			Cou	ountry P			stal Code	;		
Home Telephone Business or Cellular Tele				Telep	hone	Local Telephone				Place of Birth (City,			Province)			
Present Address (If different from above)						City		Province Country				у			Post	tal Code	
Name of Bank and Branch					Sex	Marital	al Status C		Citizenship of			Immigration ID #		ID#	<i>‡</i>		
If you are a	landed immig	grant livin	ng in (Canada, p	leas	e attacl	h a cop	y of y	our l	landing	report to	this	applic	ation.			
	Contact	informati	on in	case of en	nerg	ency, y	your ne	ext of l	kin (s	spouse	if married	or c	ommo	n law	/):		
Full Legal Nar	ne (First, Middle	e, Last)			Re	elationsl	hip	Address (City, Province)						Phone	Number		
A	ll the followin	g question	ns mu	st be ansv	vere	d "yes'	or "no	o". G	ive d	letails o	n addition	nal fo	orm fo	r "yes	s" ansv	wers.	
1. Have you e	ver been fined o	ver \$100.00	in any	y jurisdictio	n?										Ŋ	Yes	No
2. Has your license ever been denied, suspended or revoked? Is					? Is a	s a complaint pending against you in any jurisdiction?								Yes	No		
	ver been refused															Yes	No
	ver been convict				ept m	inor traf	ffic viola	tion), a	nywł	nere or a	t anytime?					Yes	No
	esently on parole				?											Yes Yes	No No
	e any outstandin een taken to cou					art of fr	rand dec	eit mi	renre	esentatio	n breach of	trust	etc in	anv		Yes	No
jurisdictio	n in the last five	years?										ti ust,	, etc. iii	arry	,	1 03	110
8. Have you claimed bankruptcy or insolvency under the <i>Bank and</i>														Yes	No		
9. Have you ever been licensed in any other jurisdiction? If yes, list jurisdiction, category and year below.										<u> </u>	Yes	No					
Trainer's Name:								Stable Name:									
Employer's name at racetrack if applicable:								Employer's Signature									
					mpl	ete the	follow	ing if	appl	icable.							
	ship to be listed of		•														
Name of perso	n designated to a	act for the en	ntity ir	n all racing	matte	rs (auth	orized ag	gent for	m, \$:	5.00).							
		L	ist h	orses ov	vne	d or le	eased				or in par						
Horse Name(s)								Name/Address of lessor if appropriate									

If in partnership(s) list horse, name, address and % of ownership held by each co-owner.

Horse	Name		Address		% Share						
Ifi	ncorporated, a	copy of the Certificat	e of Incorporation	on must be	attached.						
Complete the following employment information, beginning with the most recent:											
Position	Name & Address of	f Employer	Dates position held	(start, end)	Reason for Leaving						
If applying for an apprentice jockey's license, complete the following:											
Date of your first winner		Track		How many w	vinners have you ridden?						
	ALL APPLICAN	ITS MUST READ THE	FOLLOWING AN	D SIGN BE	LOW						
 I am subject to <i>The Alcohol and Gaming Regulation Act 1997</i> and regulations and the Rules of Racing made or adopted by the Authority; I am subject to and will abide by the rulings and decisions of the Authority, the Commission, the Stewards, Judges and racing officials; To be photographed and fingerprinted upon request of the Authority, a Steward or Judge; My fingerprints may be used for identification, investigative and record purposes. I authorize and request any person, corporation, organization (including but not restricted to any police agency), government or government agency (including but not restricted to Revenue Canada) to release to the Authority, any of my personal, financial											
or other information or documents (including but not restricted to my criminal history, outstanding charges and previous contacts with the police), (hereafter called "my information"), requested by or on behalf of the Authority for any purpose related to the Authority issuing to me a horse racing license or determining my ongoing suitability to be licensed.											
I authorize the Authority to release to any government, government agency, police agency or to any horse racing organization any of my information for any purpose related to horse racing or to my eligibility to be involved in horse racing.											
I hereby waive any rights of confidentiality in this regard. I agree to indemnify and hold harmless the Saskatchewan Liquor & Gaming Authority and the person(s) to whom this request is presented and his agents and employees from and against all claims arising out of or by reason of complying with this request.											
I state that the information provided in this document is true and complete and I make this statement with the intention that the Saskatchewan Liquor & Gaming Authority will rely on it to issue a license pursuant to The Alcohol and Gaming Regulations Act											
Declared at In the Presence of:	in the Pr	ovince/State ofSi	thgnature of Applicat	nis day nt:	of,	_A.D.					