



Saskatchewan
Liquor and Gaming
Authority

Horse Racing Branch Application

Partnership/Stable Name Registration Form

INCOMPLETE FORMS WILL NOT BE ACCEPTED.

\$5.00 CHARGE APPLICABLE AT TIME OF SUBMISSION.

Applicants are required to answer each and every question fully.

We request that this partnership/stable name be registered in accordance with the Rules of Racing of the *Saskatchewan Liquor and Gaming Authority*. This partnership/stable name is to remain in effect until December 31, 20____, or until dissolved. If dissolved, we shall file dissolution of partnership/stable name in writing with the *Authority*.

DATED AT _____ THIS _____ DAY OF _____, 20____

Partnership/Stable Name: _____

The following is a list of all owners who will be racing under the above partnership/stable name.

Name	Address (Street, City, Province, Postal Code)	Share

The following horses are registered in our name.

Name	Tattoo No.	Sex	Age	Name	Tattoo No.	Sex	Age

Name of partnership/stable name's authorized agent: _____

SIGNATURES OF OWNERS (ALL WITNESSED):

W: _____ W: _____

W: _____ W: _____

W: _____ W: _____

FOR AUTHORITY USE ONLY					
Issued By	Issue Date	Receipt No.	Effective Date	Expiry Date	Approved By