State of Montana

Montana Board of Horse Racing
P.O. Box 551
Corvallis, MT 59828
(406) 961-5422
www.commerce.mt.gov/horseracing

License #: _____

Check# or Cash; _____

Assistant Trainer Application - $50
(Must be approved by Steward)

_____
Signature of Approval by Steward for Assistant Trainer

Incomplete/inaccurate applications will not be processed! Fill in required information. ** MUST BE 18 YEARS OR OLDER *

1. Name: _____
First Middle Last

2. Address: _____
Street Address City State Zip Code

3. Mailing Address: _____
(Only if different) Street Address City State Zip Code

4. Social Security: _____ **5.** Telephone: _____

6. Date of birth: _____ **7.** Place of birth: _____
City & State

8. Name of licensed trainer you are assisting: _____

9. Are you under suspension, set down, ruled off, or otherwise debarred from participating in racing by any racing organization, association, commission or other turf authority in the United States or elsewhere? Yes or No. If 'Yes', give details:

_____

_____

10. Have you ever been arrested or convicted of violating the law (except minor traffic violations)? Yes or No. If 'Yes', give details: _____

_____

11. Are you currently on probation or parole in Montana or anywhere? Yes or No. If 'Yes', give details: _____

_____

12. Have you been previously licensed as a trainer? Yes or No. If 'No', have you successfully passed the trainer's exam for Montana? Yes or No. If 'Yes', what year did you take the trainer's exam? _____

13. Have you been previously licensed by the Montana Board of Horse Racing? Yes or No. If 'Yes', list the three (3) **most recent** years and license types: _____

_____

14. Do you have or have you ever had a license from another state? Yes or No. If 'Yes', list the three (3) **most recent** years, states, and license types: _____

_____

By the acceptance of any license pursuant to this application, I agree to abide by the Rules and Regulations of the Montana Board of Horse Racing. I hereby certify that I have read the foregoing application and affirm that every statement contained therein is true and correctly set forth. I do hereby agree as a condition precedent to the receiving of said license that the same may at any time be summarily revoked, cancelled, temporarily suspended or withdrawn by said Montana Board of Horse Racing, and said license may be revoked at any time for misstatements or omissions in the foregoing application.

15. Print Name: _____ **16.** Email Address: _____

17. Signature: _____ **18.** Date: _____