

ILLINOIS RACING BOARD

TEMPORARY LICENSE APPLICATION (OWNERS ONLY)

FEE: \$25

DATE: _____ RACE YEAR: _____

The fee paid will be applied toward the cost of the permanent application.

I, Undersigned, do hereby make an application for a temporary license on behalf of:

Name:	S	SS#		
Address:				
City	State		Zip	
Phone Number and/or Email:				
Was applicant licensed in Illinois last year?	Yes	No		

Name of the horse owned wholly or in part by the individual for whom this application is being made:

List, if racing under a stable name:

Note: This application permits an owner to race his/her horses for a period of 30 days from the date of this application. The necessary documents to obtain a permanent license must be in possession of the Illinois Racing Staff by the end of the 30th day or the applicant will be suspended on the 31st day.

Date to be suspended:

I, UNDERSIGNED, AM RESPONSIBLE FOR NOTIFYING THE APPLICANT OF THE CONDITIONS SPECIFIED ON THE APPLICATION. I ACCEPT RESPONSIBILITY TO ENSURE THE ABOVE OWNER IS IN COMPLIANCE WITH IRB RULE 502.40 AND SUBMIT THEIR PERMANENT APPLICATION, AND ARE FINGERPRINTED IF APPLICABLE, WITHIN THE REQUIRED 30 DAYS OF ISSUANCE. TRAINERS WHO FAIL TO ENSURE OWNERS' COMPLIANCE SHALL BE SUBJECT TO CIVIL PENALTY.

TRAINER'S NAM (PLEASE PRINT		Si		NAME IF OTHER THEN TRAINER (PLEASE PRINT)			
FOR OFFICE USE ONLY							
Applicant Needs: Mailed on:	Applica	tion Only	O Application & Fingerprints Given To:				
LICENSE NUMBER:	DATE	Clerk:	TRACK CODE:				
Payment Type: (Rev Dec/2024)	⊖ cc			○ HGCA			