

# Charles Town Races

## License Application



Phone: 304.724.4312

Fax:

**2014**

08/08/2014

09:00:06



Section 1	Section 2
Soc Sec # or Tax ID # _____	Address _____
Name _____	City _____
Date of Birth ____ / ____ / ____	State _____ Zip _____
Trainer / Employer _____	Phone # _____ Cell # _____
Stable Name _____	Partners _____

**Identification:**  
 Sex \_\_\_\_\_ Age \_\_\_\_\_ Color: Hair \_\_\_\_\_ Color: Eyes \_\_\_\_\_ Height \_\_\_\_\_ ft. \_\_\_\_\_ in. Weight \_\_\_\_\_

Questions a-h must be answered "yes" or "no"

a. Has you or your spouse's racing license ever been denied, suspended for more than 7 days, or revoked ?	Yes	No
b. Has any other type of license or permit of you or your spouse ever been suspended, denied, or revoked ?	<input type="checkbox"/>	<input type="checkbox"/>
c. Have you ever been expelled, discharged, or ejected from any race track or fined more than \$100.00 ?	<input type="checkbox"/>	<input type="checkbox"/>
d. Have you or your spouse ever been convicted of, or forfeited bail on, any felony or misdemeanor criminal offense ? (Including DUI or DWI)	<input type="checkbox"/>	<input type="checkbox"/>
e. Are there any criminal charges currently pending anywhere against you or your spouse ?	<input type="checkbox"/>	<input type="checkbox"/>
f. Are you or your spouse currently on parole or probation ?	<input type="checkbox"/>	<input type="checkbox"/>
g. Are there any outstanding civil judgements against you or your spouse ?	<input type="checkbox"/>	<input type="checkbox"/>
h. Do you have or, have you had a valid THOROUGHBRED LICENSE at any other racetrack ?	<input type="checkbox"/>	<input type="checkbox"/>
i. Are you a United States citizen ?	<input type="checkbox"/>	<input type="checkbox"/>

If NO, Citizenship \_\_\_\_\_ Visa # \_\_\_\_\_  
 Expiration \_\_\_\_\_

**For a through h above, for each "yes" above, you must provide full details on back of this application.**

I hereby certify that I have read the foregoing application and affirm that every statement contained therein is true and correctly set forth, and I do hereby assert and agree, as a condition precedent to the receiving of said license, that the same may, at any time, be summarily revoked, canceled or suspended, or withdrawn.

I authorize the West Virginia Racing Commission or it's designated agent to investigate my background to determine my eligibility for a license as per the West Virginia Rules of Racing.

I authorize any company, organization, educational or health care institution or law enforcement agency to release any personal records, medical records, educational records, credit history records, criminal history records, or other such documentation to the West Virginia Racing Commission or it's authorized agent.

<b>NOTE: Trainers and Businesses need copy of Workers' Compensation</b>	State & Year Last Fingerprinted: State: _____ Year: _____	<b>Return to: WVRC License Clerk - Charles Town Races</b> <b>Mail to: P. O. Box 551 Charles Town WV 25414</b> <b>Overnight to: 580 East 5th Ave. Ranson WV 25438</b>
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### Section 3

Please mark the license(s) you are requesting today	Signature of Applicant	Date
<input type="checkbox"/> 2 A ADMINISTRATIVE \$20.00	<input type="checkbox"/> 101 A HOTEL \$20.00	<input type="checkbox"/> 6 A PURCHASING \$20.00
<input type="checkbox"/> 5 A ANNOUNCER \$20.00	<input type="checkbox"/> 102 A HOUSEKEEPING \$20.00	<input type="checkbox"/> 17 O RACING INTER \$20.00
<input type="checkbox"/> 18 B APP. JOCKEY \$20.00	<input type="checkbox"/> 14 A HUMAN RESOURCES \$20.00	<input type="checkbox"/> 16 O RACING OFFICAL \$20.00
<input type="checkbox"/> 36 B ASSSIT TRAINER \$30.00	<input type="checkbox"/> 5 C INVESTIGATOR \$20.00	<input type="checkbox"/> 19 O RACING STEWARD \$30.00
<input type="checkbox"/> 20 O ASST STARTER \$20.00	<input type="checkbox"/> 30 A IT \$20.00	<input type="checkbox"/> 21 A SECURITY/SURVEL \$20.00
<input type="checkbox"/> 1 B AUTH AGENT \$20.00	<input type="checkbox"/> 38 B JKY SILKS CORD \$20.00	<input type="checkbox"/> 100 A SERVER \$20.00
<input type="checkbox"/> 3 B BLACKSMITH / PL \$20.00	<input type="checkbox"/> 17 B JOCKEY \$30.00	<input type="checkbox"/> 32 B STABLE NAME \$40.00
<input type="checkbox"/> 25 A CAMERA OP/TOTE \$20.00	<input type="checkbox"/> 19 B JOCKEY AGENT \$20.00	<input type="checkbox"/> 18 O STALL SUPER \$20.00
<input type="checkbox"/> 5 B CHAPLAINCY \$20.00	<input type="checkbox"/> 8 O JOCKEY RM CUST \$20.00	<input type="checkbox"/> 15 A SUPERVISOR \$20.00
<input type="checkbox"/> 2 O CLERK OF SCALES \$20.00	<input type="checkbox"/> 38 A JOCKEY VALET \$20.00	<input type="checkbox"/> 22 A TRACK BLACKSMIT \$20.00
<input type="checkbox"/> 3 O CLOCKER / ASST \$20.00	<input type="checkbox"/> 12 A MAINT EMPL \$20.00	<input type="checkbox"/> 23 A TRACK SUPER \$20.00
<input type="checkbox"/> 17 A DIRECTOR \$20.00	<input type="checkbox"/> 2 C MARKETING \$20.00	<input type="checkbox"/> 35 B TRAINER \$30.00
<input type="checkbox"/> 4 A EMT-B/PARAMEDIC \$20.00	<input type="checkbox"/> 15 A MISCELLANEOUS \$20.00	<input type="checkbox"/> 24 A VENDOR \$40.00
<input type="checkbox"/> 13 B EQUINE DENTIST \$20.00	<input type="checkbox"/> 16 A MUTUEL EMPL \$20.00	<input type="checkbox"/> 24 B VENDOR HELPER \$20.00
<input type="checkbox"/> 14 B EX-RIDER \$20.00	<input type="checkbox"/> 4 B NURSE \$20.00	<input type="checkbox"/> 40 B VET ASST \$20.00
<input type="checkbox"/> 1 C FINANCE \$20.00	<input type="checkbox"/> 12 O OUTRIDER \$20.00	<input type="checkbox"/> 41 B VET TECH \$20.00
<input type="checkbox"/> 7 A FOOD/BEVERAGE \$20.00	<input type="checkbox"/> 25 B OWNER \$30.00	<input type="checkbox"/> 22 O VETERINARIAN \$30.00
<input type="checkbox"/> 27 B FOREMAN \$20.00	<input type="checkbox"/> 29 B OWNER/ASSIT TRA \$60.00	<input type="checkbox"/> 13 A VP \$20.00
<input type="checkbox"/> 42 B GAMING/DEALER \$20.00	<input type="checkbox"/> 28 B OWNER/TRAINER \$60.00	<input type="checkbox"/> 105 A WARDROBE \$20.00
<input type="checkbox"/> 10 A GEN SUPER \$20.00	<input type="checkbox"/> 18 A PARKING \$20.00	<input type="checkbox"/> 8 A WAREHOUSE \$20.00
<input type="checkbox"/> 9 A GM / ASST GM \$20.00	<input type="checkbox"/> 30 B PARTNERSHIP \$20.00	
<input type="checkbox"/> 15 B GROOM \$20.00	<input type="checkbox"/> 19 A PHOTOGRAPHER \$20.00	
<input type="checkbox"/> 11 A HORSEMEN'S BOOK \$20.00	<input type="checkbox"/> 42 A POKER DEALER/GA \$20.00	
<input type="checkbox"/> 16 B HOT WALKER \$20.00	<input type="checkbox"/> 33 B PONY RIDER \$20.00	

**AFTER you complete Section 3, please give completed form to the clerk.**