

## **2017 PURSE AUTHORIZATION FORM**

Before you can race, all information below must be completed. Please provide social security numbers and NYS Racing & Wagering Board license numbers (license must be current). List all owners as they appear on the program. All non-US citizens must have a US social security number otherwise they may be subject to a 30% penalty from the IRS. NOTE: All Horsemen must also fill out a W-9 form in addition to this form.

Horsemen Informa	tion (Owners, Drive	ers, Trainers):				
Last Name	First Name		NYSR&W License #		SS# or Federal ID#	
Last Name	First Name		NYSR&W License #		SS# or Federal ID#	
Last Name	First Name		NYSR&W License #		SS# or Federal ID#	
NOTE: IF YOU ARE	AN OWNER WITH	A STABLE PLEA	SE INCLU	IDE THE STABLE NA	AME AND YOUR NAME	
YOU ARE A(N):	☐ Owner	☐ Trainer	☐ Driver			
	m you authorize Ba se account bearing		o collect "	New York State Sta	arting Fees" from any	
SIGNATURE:				DATE:		
SIGNATURE:				DATE:		
	/NER WITH PARTNI Address (MUST BE				IR CHECKS UP!):	
City/State/Zip		Telephone	e	Email Addre	ess	
Please check appropr	iate box for purse che	ck disbursemen	t:			
☐ Pick-up			<u>or</u>	☐ Mail to above a	ddress	
Please complete, date	e and sign this form ar	nd <u><b>mail</b>, <b>fax,</b> or</u>	email to	Batavia Downs:		
<u><b>Mailing add</b></u> Batavia Dowr	ress: as Accounting Dept.			<u>number:</u> 343-6873		

8315 Park Road Batavia, NY 14020

<u>Email:</u>

ATTN: Rick Lawrence, Horsemen Bookkeeper

rlawrence@westernotb.com

NOTE: Batavia Downs automatically pays 5% to the drivers and trainers from the owners' winnings.