**MUST HAVE PRIOR YEARS LICENSE TO RENEW**

**SOUTH DAKOTA COMMISSION ON GAMING**

**RENEWAL LICENSE APPLICATION**

87 Sherman Street
Deadwood, SD  57732
(605)578-3074

**FEE Rec’d $___________**

Money must accompany application

<table>
<thead>
<tr>
<th>$5.00 FEES</th>
<th>$10.00 FEES</th>
<th>$20.00 FEES</th>
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<tbody>
<tr>
<td>□ Concession Operator $5.00</td>
<td>□ Apprentice Jockey $10.00</td>
<td>□ Owner / Trainer $20.00</td>
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<tr>
<td>□ Exercise Rider $5.00</td>
<td>□ Owner $10.00</td>
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<tr>
<td>□ Groom $5.00</td>
<td>□ Multiple (Specify) $10.00</td>
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<tr>
<td>□ Mutuel Employee $5.00</td>
<td>□ Starter $10.00</td>
<td></td>
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<tr>
<td>□ Pony Rider / Outrider $5.00</td>
<td>□ Veterinarian $10.00</td>
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<tr>
<td>□ Veterinarian Assistant $5.00</td>
<td>□ Jockey $10.00</td>
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<tr>
<td>□ Assistant Starter $5.00</td>
<td>□ Other (Specify) $10.00</td>
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<td>□ Other (Specify) $5.00</td>
<td>□ Other (Specify) $10.00</td>
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**APPLICANTS NAME (Print)____________________________________________________________________**

First       Middle Initial   Last

DATE OF BIRTH_________________ SOCIAL SECURITY#____________________________

TELEPHONE (Home)_____________________________ (Business)____________________________

Mailing Address (POB, street or rural route)_____________________________________________________________

City / Town / State/ Zip Code____________________________________________________________

Other then S.D., I have **Previously Been Licensed** State_____ 20__, as_______
in the past 5 years in the following states; State_____ 20__, as_______
State_____ 20__, as_______

Are you NOW, or have you ever been fined, suspended, or ruled off from participating in racing by any racing association or Commission?

Yes_____ No_____ If yes, give the following details on the reverse side: date, track, violation, and disposition.

**OVER**

Multi-category Racing Renewal Application – 11/21/19
Have you been arrested for any criminal offense, either felony or misdemeanor, including driving under the influence or other alcohol related violation within the last year?

Yes_____  No_____  If yes, give the following details, below: date, place, crime charged with, and disposition.

**JOCKEY, APPRENTICE JOCKEY,**

Do you have a current Physical Fitness Card?  Yes____   No____

If so, give the number and in which state Received______________________Date issued_________

I have ridden ____ winners; rode first winner at ____________track; on_________(date)

Explanations:____________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________

I agree that any correspondence, notice of hearing or right of appeal from the South Dakota Commission on Gaming mailed to me at the address listed on this application constitutes reasonable notice under the laws of South Dakota and the rules of the South Dakota Commission on Gaming.

I HEREBY CERTIFY that I have read the foregoing application and know and understand the contents thereof, and that every statement contained therein is true and correct. I hereby agree that as a condition of receiving said license, that I will abide by and obey the rules, regulations and conditions of the South Dakota Commission on Gaming, the laws of the State of South Dakota and orders of the stewards. I consent to the search of any and all police records on me and to the release of such information contained therein to racing officials. I agree to submit to any examination requested or ordered by the stewards to determine my ability to perform my duties. I further agree that the said license may be summarily revoked, cancelled, temporary suspended or withdrawn by the South Dakota Commission on Gaming at any time, because of the infractions of the rules of racing, or for misstatement or omissions in this application.

✓ I declare and affirm under the penalties of perjury that this Application, and any statements, attachments, supporting schedules and documents have been examined by me, and to the best of my knowledge and belief, are in all things true and correct. I understand that any person who signs such a statement knowing the same to be false or untrue, in whole or in part, shall be guilty of perjury.

_________________________________________          _________________________
Applicant's Signature    Date