

## 2024 PURSE AUTHORIZATION FORM

**Before you can race, all information below must be completed**. Please provide social security numbers, USTA number, and NYS Racing & Wagering Board license numbers (license must be current). 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.

form, please check the box & simply sign the purse authorization form.  Horsemen Information (Owners, Drivers, Trainers):						
Last Name	First Name	USTA #	NYSR&W License #	SS# or Federal ID#		
Business Name ( <i>IF</i>	YOU ARE AN OWNER W	/ITH A STABLE PLEAS	SE INCLUDE THE STABLE NAI	ME AND YOUR NAME)		
Signature						
** IF THERE ARE	MULTIPLE OWNERS	FOR A HORSE, ALL	. OWNERS MUST SIGN TH	E AFFIDAVIT FORM.		
YOU ARE A(N):	☐ Owner	☐ Trainer ☐	Driver			
Permanent Mailin  Name	g Address (MUST BE		ARDLESS OF HOW YOU REd	CEIVE PAYMENT!)		
City/State/Zip		Telephone	Email Address	 S		
	oriate box for purse che	·				
☐ Pick-up						
	te and sign this form ar	nd <b>mail</b> , <b>fax,</b> or <b>ema</b>	ail to Batavia Downs:			
Mailing ad	dress: vns Accounting Dept.	<del></del>	Fax number: 585-343-6873 Email:			

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

bataviaHBS@westernotb.com

ATTN: Horsemen Bookkeeper



## **2024 AFFIDAVIT FORM FOR MULTIPLE OWNERS**

Each Owner Must Sign This Affidavit:							
We acknowledge that the p due to the partnership and	rimary owner, will bear responsibility to distril	, is authorized to receive all funds e funds appropriately.					
Primary Owner Signature		_					
Other Owners							
Name	Signature	Date					
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	-						