

(FOR OFFICE USE ONLY)
 License Number: _____
 Date Issued: _____
 Fee Paid: _____
 Check #: _____ Cash: _____
 Received By: _____
 Receipt #: _____



OREGON RACING COMMISSION
Application to Register Assumed Name
Fee: \$60.00

I/We hereby make application to register an Assumed Name in accordance with OAR 462-120-0010 and OAR 462-120-0040(4)(B)(d) and all other terms and provisions of the Rules and Regulations or Racing as set forth by the Oregon Racing Commission.

Assumed Name: _____

I/We are [Check One]:

- A Corporation** (Attach a copy of your Certificate of Incorporation)
- A Formal Partnership** (Attach a copy of your written Partnership Agreement)
- An Informal Partnership** (Each person must be individually licensed as an owner)
- An Individual** (Must be individually licensed as an owner)

Has your Assumed Name been registered elsewhere for the current year? ____ Yes ____ No

If "Yes," list the place and date of registration: _____

List below the Names, Addresses and Racing License Numbers of all individuals, corporations or partnerships using the Assumed Name listed above

ORC License #	Name	Address	Percentage

At the time of making this application, are any of the above named, individuals, corporations, or partnerships under suspension, set down, ruled off, or otherwise debarred racing authority in the United States or elsewhere? ____ Yes ____ No

If "Yes," attach the statement indicating when, where and by whom the ruling(s) were made and the offense(s) charged.

I CERTIFY UNDER THE PENALTY OF LAW, THE FORGOING IS TRUE AND CORRECT

Signature of Applicant: _____

(Please note if this application is not presented in person, your signature must be notarized)

Notary Public: _____ **My Commission Expires:** _____

Send or Fax this Application to: Oregon Racing Commission ■ 233 Rogue River Hwy #1245 ■ Grants Pass, OR 97527
Phone: (971) 352-0455 ■ Fax: (971) 673-0213