



Purse Authorization and ACH Form for Harness Racing

Check all that apply Owner Trainer Jockey (Guild Y/N)

Name:

Mailing Address:

Additional Owners:

Phone: _____

Email: _____

List of Horses Racing: _____

Substitute W-9 for Harness Purses (Non-U.S. Citizens please use W-8 form, see website for form)

Individual's Name (as on Social Security Card) _____

OR Stable/Company/DBA (If applicable) _____

Tax Identification Number

Social Security Number _____ - _____ - _____ **OR** EIN ____ - _____ Failure to provide a valid US Tax number may result in an IRS Penalty under penalties of perjury. I certify that: I am a US Citizen or other person including a US resident alien.

ACH Payment Enrollment **New** **Change** **Close Acct.**

Name of Financial Institution: _____

Nine Digit Routing Number: _____

Name on Account: _____

Account Number: _____

Type of Account: Checking Savings **PLEASE ATTACH A VOIDED CHECK**

Contact Information

Mail: PO Box 405 Franklin, KY 42135

Email: horsemensbookkeeper@kentuckydowns.com

Fax: 270.715.2068

Signature: _____ **Date:** _____