TRAINER LICENSE APPLICATION

To The Licensing Committee
Under the Rules of Racing of the Korea Racing Authority, I hereby wish to apply
for a Trainer License.

1 PERSONAL INFORMATION

LAST NAME	
FIRST NAME	
DATE OF BIRTH	
PASSPORT(ID) NUMBER	
NATIONALITY	
MARITAL STATUS	
RESIDENTIAL ADDRESS	
TELEPHONE	
MOBILE	
FAX	
EMAIL	
CURRENT LICENSING AUTHORITY	
CURRENT TRACKS YOU TRAIN	

2 PARTICULARS OF APPLICATION

RACECOURSE	□ SEOUL	□ BUSAN
PERIOD APPLYING FOR (DD/MM/YY)	FROM	1
	ТО	/ /

3 TRAINING HISTORY

YEAR TRAINER LICENSE GRANTED	
CAREER HIGHLIGHTS	
COUNTRIES IN WHICH YOU HAVE TRAINED	

4 TRAINING PERFORMANCE

SEASON	RUN	WIN	2 N D	3RD	LOCATION
LIFETIME RECORD					

* An applicant must meet one of the following requirements: i) 8% winning rate or ii) 15% quinella rate for the last three seasons at least or iii) have achieved over 1,000 career wins.

5 DISCIPLINARY HISTORY

	☐ YES	□ NO		
HAVE YOU EVER BEEN DISQUALIFIED, SUSPENDED, REVOKED, WITHDRAWN, WARNED OFF, FINED OR REFUSED BY ANY RACING AUTHORITY?	(IF "YES", PLEASE PROVIDE DETAILS)			
HAVE YOU EVER BEEN CHARGED FOR ANY CRIMINAL OFFENCE IN ANY COURT OF LAW?	☐ YES	□ NO		
	(IF "YES", PLEASE PR	OVIDE DETAILS)		

* Full disciplinary records from current racing authority must be submitted.

PLEASE TICK ONE BOX TO INDICATE YOUR PREFERENCE OF NOTIFICATION AS TO THE RESULT OF THIS APPLICATION.

7 ACKNOWLEDGEMENTS AND DECLARATIONS

I acknowledge that:

- a) I have read and understand the Rules of Racing of the Korea Racing Authority, and I agree to familiarize myself with these Rules relating to trainers, including relevant amendments and to be bound by any amendments to the Rules.
- b) My license, if granted, will be issued in accordance with the Rules of Racing.

- c) The granting of a license is not to be taken as any form of assurance that an application for a license for the following or any subsequent racing season will be granted.
- d) The decision of the Licensing Committee of the Korea Racing Authority with regards to an application for a license is final and not subject to appeal.

I declare that the information provided is true and correct.

NAME	
SIGNATURE	
DATE	