

PRINT OR TYPE ANSWERS TO ALL OF THE FOLLOWING QUESTIONS

Legal Name (First, Middle, Last)			Date of Birth	DAY	MONTH	YEAR
Permanent Home Address		City	Province	Country	Postal Code	
Home Telephone	Business or Cell Phone		Local Telephone		Place of Birth (City, Prov, Country)	
Present Address (IF DIFFERENT FROM ABOVE)		City	Province	Country	Postal Code	
Have you previously held a horse racing licence? No ___ Yes ___ What jurisdiction? _____			Gender	Health Insurance Number		
H.I.N Province						

SPONSOR INFORMATION:

Full Legal Name (First, Middle, Last)	Relationship	Address (City, Province)	Phone Number

ALL APPLICANTS MUST READ THE FOLLOWING AND SIGN BELOW

Saskatchewan Liquor and Gaming Authority (SLGA) is required to collect information for the purpose of licensing prospective and current horse racing licensees. This information is collected in order to comply with the good character and other requirements set forth in *The Alcohol and Gaming Regulation Act, 1997*. SLGA is required under *The Freedom of Information and Protection of Privacy Act* to protect the confidentiality of such information in its possession and control, and to use the information only for the purpose for which it is collected. The following consent form allows SLGA representatives to verify or investigate the information provided in this registration application.

THE APPLICANT HEREBY:

- (a) Consents to the direct and indirect collection from any source and to the use of the Saskatchewan Liquor and Gaming Authority (SLGA) of all personal, financial, business, general, or criminal information or documents that SLGA may reasonably require to determine the prerequisites under *The Alcohol and Gaming Regulation Act, 1997*, to grant a horse racing licence to the applicant, namely whether the applicant is of good character;
- (b) Consents to the release by SLGA of any information authorized to be collected pursuant to clause (a) to any law enforcement agency, other gaming jurisdiction or agency with which SLGA has a formal arrangement or agreement;
- (c) Consents to the release to SLGA by all persons, including but not limited to all federal, provincial, or municipal licensing bodies and departments, police services, law enforcement agencies, the registrar in bankruptcy, Canada Revenue Agency, credit bureaus, financial institutions, professional and industry associations, former and current employers, of all personal, financial, business, general or criminal information or documents that SLGA reasonably determines it requires respecting this application;
- (d) Releases all persons referred to in paragraph (c) including their officers, agents and employees, from all liability respecting the release of information to SLGA pursuant to paragraph (c);
- (e) Acknowledges that a photocopy of this document will have the same force and effect as the original;
- (f) Understand that the consent is in effect for as long as I hold a Horseman Licence and or Track Personnel Licence and for any application renewals;
- (g) Certify that the information provided in this application is accurate, correct and true. I understand that if any of the information provided in this application is not accurate, correct and true, SLGA may deny my application or may subsequently revoke my horse racing licence. I further understand that if any of the information provided in this application is fraudulent, I may be subject to prosecution under the *Criminal Code of Canada*.

I Acknowledge – I am subject to *The Alcohol and Gaming Regulation Act, 1997* and the *Rules of Racing* made or adopted by the SLGA;  
- I am subject to and will abide by the rulings and decisions of the SLGA, the Commission, the Stewards, Judges or racing officials.

I have read the above statement and understand it.

Print name: \_\_\_\_\_ Sign: \_\_\_\_\_ Date: \_\_\_\_\_

**SUBMIT APPLICATION**

This form may be submitted by email to SLGA: [HorseRacing@slga.gov.sk.ca](mailto:HorseRacing@slga.gov.sk.ca)