



APPOINTMENT OF FINANCIAL & CLAIMING AGENT



TAKE NOTICE that I/we _____

being the holder of an owner's license/racing participant as recognized by Horse Racing Alberta, hereby appoint:

_____ of _____
(Print name of agent) (Agent city of residence)

to act as Authorized Agent on my/our behalf for the purposes indicated below.

This authorization **MUST** be revoked or changed **in writing**. **Please carefully review the list of terms below.**

IF you prefer to exclude any part of the list, you **MUST** cross that line out and **INITIAL** where indicated.

Initial terms

(Initial time limit below)

deleted ONLY

DELETE THE TERMS NOT TO BE AUTHORIZED

One (1) Year

(1) to withdraw money from my/our purse account

Three (3) Year

(2) to claim horses on my/our behalf

No Time Limit

(3) to transfer money from my/our account for the purpose of claiming

this option is only available for Standardbred Racing

(4) to sell horses owned by me/us

(5) to sign a claiming race authorization

(6) to sign a lease on horse(s) owned by me/us

This appointment to remain in effect until December 31, _____ unless revoked.

To be filled out by Commissioner of Oaths or Racing Official ONLY

Signed at _____
in the Province of _____
this ___ day of _____ 20___
before me.

Please print name

Signature

To be completed by

A Commissioner for Oaths or
(Must include stamp/expiry date)

Designated Race Official

Print Name of Owner

Signature of Owner

Commissioner of Oaths please stamp above.

AUTHORIZED AGENT MUST COMPLETE THIS PORTION FOR APPOINTMENT TO BE VALID

In signing this declaration, I hereby certify that I am the holder of an Authorized Agent license as recognized by Horse Racing Alberta.

Horse Racing Alberta
Authorized Agent License No. _____

Signature of Authorized Agent



**REVOKE
OR
CHANGE**

FINANCIAL & CLAIMING AGENT



TAKE NOTICE that I/we _____
 being the holder of an owner's license/racing participant as recognized by Horse Racing Alberta, and having previously
 authorized, as my/our AA: _____
 hereby **REVOKE/CHANGE** this authorization as indicated below.

Initial & Date Revoke or Change

REVOKE	CHANGE	Print Name	Signature
		_____	_____
		_____	_____
		_____	_____
		_____	_____

IF CHANGE, PLEASE DESCRIBE

- (1) to withdraw money from my/our purse account
.....
- (2) to claim horses on my/our behalf
.....
- (3) to transfer money from my/our account for the purpose of claiming
.....
- (4) to sell horses owned by me/us
.....
- (5) to sign a claiming race authorization
.....
- (6) to sign a lease on horse(s) owned by me/us
.....

Witness: _____

Signed at:
 in the Province of: _____
 this _____ day _____ 20 _____

(Witness **MUST** be commissioner or designated racing official.)

Commissioner of Oaths please stamp above.