



Claiming Form

(to enter a claim)

I hereby claim the horse named _____

from the _____ race on this date, _____, 20____, for the sum of \$ _____.

In making this claim, I certify that I am claiming the above horse for my own account, or as an authorized agent.

I hereby designate _____ to take charge of the horse immediately after the race in the event I am the successful claimant.

The trainer receiving this horse will be _____.

Please print. If more than one owner, please put the name of the primary owner in space #1.

	OWNER	CITY	STATE	STATE LICENSE #	USTA #
1.	_____	_____	_____	_____	_____
2.	_____	_____	_____	_____	_____
3.	_____	_____	_____	_____	_____
4.	_____	_____	_____	_____	_____

Authorized Agent/Owner's Signature: _____

Authorized Agent/Owner's Printed Name: _____

I hereby waive the Coggins test.

I would like a Coggins test drawn (fee \$ _____). I understand that the results must be in from the laboratory before the horse is entered to race.

