



**State of Indiana**  
**Indiana Horse Racing Commission**  
**STABLE NAME REGISTRATION**  
*(For Corporations, Partnerships, Farms etc.)*

**New**     **Renewal**

Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Reviewed By \_\_\_\_\_

License # \_\_\_\_\_

**Breed:**    Thoroughbred    Standardbred    Quarter Horse

**STABLE NAME** \_\_\_\_\_ **USTA #** \_\_\_\_\_  
(STANDARDNBRED)

**Please list all individual owners under Stable Name (EACH INDIVIDUAL WITH 5% OR MORE INTEREST MUST BE LICENSED AS AN OWNER).**

Owner's Name	Owner's Name
Address	Address
City                      State                      Zip	City                      State                      Zip
(      )	(      )
Phone Number                      % of Ownership                      IHRC License #	Phone Number                      % of Ownership                      IHRC License #
Horse(s) _____	Horse(s) _____
Owner's Name	Owner's Name
Address	Address
City                      State                      Zip	City                      State                      Zip
(      )	(      )
Phone Number                      % of Ownership                      IHRC License #	Phone Number                      % of Ownership                      IHRC License #
Horse(s) _____	Horse(s) _____

**At the time of making this application are any of the above named individuals under revocation or suspension, ruled off or otherwise ineligible for racing in any jurisdiction in the United States or elsewhere?  Yes     No** If YES, attach a separate sheet to include when, where and by whom the ruling(s) were made and the offense or offenses charged.

Name of person responsible for all racing activities and/or business of this stable.

\_\_\_\_\_  
Signature                      Date Signed

**Indiana Grand**  
4425 N 200 W  
Shelbyville, IN 46176  
Ph: 317/713-3350  
Fax: 317/713-3355

• **Indiana Horse Racing Commission** •

**Hoosier Park**  
4500 Dan Patch Circle  
Anderson, IN 46013  
Ph: 765/609-4855  
Fax: 765/683-2568