# 2026 RENEWAL KEY EXECUTIVE LICENSE APPLICATION

Oklahoma Horse Racing Commission
One Remington Place – Building B
Oklahoma City, OK 73111
(405) 419-4441 or (405) 943-6472
www.ohrc.ok.gov
RP: ohrclicensing@ohrc.ok.gov
WRD/FMT: wrd.fmtlicensing@ohrc.ok.gov

Office Use Only -Reviewed By:
Effective
FP
Rec#
ClerkRevisedBy;

LICENSE FEE: \$300 (250 Gaming + 50 Racing).

An investigative fee of \$50.00 per hour plus expenses may apply, if so, it will be billed under separate cover.

- Application must be typewritten or **CLEARLY PRINTED** in black ink. All questions must be answered in full. If a question is not applicable, so state. **Applications which are not complete and legible will not be considered.**
- If space provided is not sufficient for complete answers or you wish to furnish additional information, attach additional sheets of the same size and number answers to correspond with the question.
- The enclosed various Release of Information/Liability forms must be completed with this application.
- Please do not use extra staples, paperclips, or tabbed pages.

### I. PERSONAL DATA

FULL LEGAL NAME:					
	Last		First	Middle	
Date of Birth:		s	ocial Security Num	ber:	
Gender: Male	Female	ı	Place of Birth:		
Height:	Weight:	I	Race:		
Driver's License Num	ber:		State issued:		
Present Home Addres	ss:		Nl Cit. Cit 7	. 6.1.	
		Street or PO Bo	x Number, City, State, Zi	p Code	
Home Telephone: (_	)		Cell: (	)	
Email Address:					
		II. MA	ARITAL STATUS		
	nce the date of your	• •	ation, has your mai	ital status changed?	If YES, choose your
	Single	Married	Divorced	Separated	Widowed
Monthly Alimony	y: \$	Monthly Chil	d Support: \$	Number of C	Children:

## III. EMPLOYMENT

NAME (	OF GAMING EM	PLOYER:					
ADDRES	SS OF EMPLOYE	R:					
EXECUT	TIVE POSITION Y	OU WILL FIL	L:				
BUSINE	SS PHONE:	_(	)				
SUPERV	/ISOR:						
Α.	state, includin	g but not lin	mited to; a r	-		_	_
	Name of Busir	ness Loc	ation	Partners	Partner's Addr	ess(es)	Date of operation
						,	
В.		een a partic	ipant in any	group which has bee	fused a gaming license en denied a gaming lice		_
c.		ich has been		ning license by any st	ted a gaming license o	r been a pa	rticipant in
	License Type	Name of Est	ablishment	Location	Period of Licensure	Disciplinar	y Actions

D.		f your last application (this includes State Lo	, do you have any relatives a ottery and Racing)?	ssociated with	n or employed in the	
	No	Yes – Complete the	following.			
	Name of Relative	Relation		ssociation or imployment	Date of Association or Employment	
		IV	CREDIT RECORD			
	e date of your las	st application, has you	r credit record been conside	red unsatisfac	tory, or have you ever	
□ No		ovide dates, places, n	ames of creditors and circum	ıstances:		
		V.	COURT RECORD			
<u>See</u>	OHRC Rules for R	_	:80-5-6 General grounds for ning License applications	refusal to issue	e license or denial o <u>f</u>	
Α.	summoned to a	answer for any crimi	on, have you been question nal offense or violation for uding traffic citations other	r any reason v	whatsoever, regardless	
	No Yes – Specify below.					
	Date	City/State	Charge		Final Disposition	
В.	Are you current	tly on narola probat	ion or supervised release?			
Б.	No No	Yes	ion or supervised release:			
•						
C.		ved a pardon for any				
	No L		on additional information s without exception.	heet and atta	ach to this application.	

D.	Has a criminal indictment, information or complaint ever been returned against you, but for which you were not arrested or in which you were named as an un-indicted party?					
	No Yes					
E.	Have you been subpoen Board or commission?	aed to appear to	testify be	ore a federal, st	ate or county g	rand jury,
	No Yes					
F.	Since the date of your la order?	est application, h	ave you ha	d a civil or crimi	nal record expu	inged by a court
	No Yes - W	/hen?				
		Date		City	County	State
		Specify below.				
	Name	Relationship	Date	City/State	Charge	Disposition
н.		ive date, place, co	ourt, names			
		nal disposition be	low:			
l.	Has anything changed sin noted previously on this f		-	-	ive application t	hat has not been
	No Yes – I	f yes, list below de	etails of cha	nges:		

### AFFIDAVIT VERIFYING LAWFUL PRESENCE IN THE UNITED STATES

Instructions for required verification of United States citizenship <u>OR</u> qualified alien status in the United States: All natural persons fourteen (14) years of age or older and present in the United States, applying for a license with the Oklahoma Horse Racing Commission are required, by the provisions of 56 O.S. Supp. 2007 § 71, to provide the Commission with verification of lawful presence in the United States by executing one of the statements below.

		, of lawful age,
(PRINT Applican	nt's Full Legal Name)	
eing first duly sworn, upon oath state	s, under penalt	ty of perjury, as follows:
I am a United States citiz	en.	
and I am lawfully preser your Passport / Visa (ind	nt in the United cluding I-94) / A	Immigration and Naturalization Act, d States. Provide a legible copy of Alien Registration (front and back).
I am not a United State States during the time of		I will not be present in the United
Applicant's Signature		NOTARY PUBLIC
igned or attested before me this	day of	, 20
(NOTARY SEAL)	Лу Commission	expires:
		OHRC298LIC/LED 7-15-16 LC

## **COMPLIANCE STATEMENT**

By acceptance of a license issued pursuant to this application, I agree to comply with the rules of the Oklahoma Horse Racing Commission (OHRC); the laws of the United States of America, the State of Oklahoma, Municipalities and other subdivisions thereof, and agree to permit personnel of the OHRC to search my vehicle(s), any premise which I may occupy or control or have the right to occupy or control and my personal property and effects including a personal search while within the enclosure of the racetrack and/or gaming facility, and the seizure of any article, the having of which within such enclosure may be forbidden by law or Commission Rules. I further agree to permit personnel of the OHRC to remove from the above listed areas any item(s) they deem relevant to their investigation. It is understood that I will receive a receipt from OHRC for any and all items thus removed. I further understand that any items so removed by the OHRC may be used in a court of law or Board of Stewards Hearing during a criminal prosecution or an administrative proceeding. I am giving this written permission to the OHRC freely and voluntarily.

I hereby request and authorize the OHRC to conduct an official investigation of my personal history and background. I understand that any investigation, the application and any information submitted with relation to my application, are subject to the Open Records Act of Oklahoma and shall be treated in accordance as such. I understand that, except where specific State or Federal statute creates a confidential privilege, persons who submit information to public bodies have no right to keep this information from public access, nor reasonable expectation that this information will be kept from public access. I understand that my fingerprints will be taken and submitted to the Federal Bureau of Investigation (FBI) and the Oklahoma State Bureau of Investigation (OSBI) for a Criminal Records Report. I understand that I have the right to challenge inaccurate information on said Report and have it corrected. I understand that if I believe the Criminal Records Report contains inaccurate information I should contact the agency or entity that provided the information, or I can challenge the information with the FBI. I understand that I can obtain information on how to challenge inaccuracies at <a href="https://www.fbi.gov">www.fbi.gov</a>. I understand the FBI will retain my fingerprints and associated information/biometrics and, while retained, my fingerprints will continue to be compared against other fingerprints submitted to or retained by the FBI.

I hereby certify that the information and statements I have provided herein are true and correct. I further certify that I understand all of the statements above and further authorize all consumer reporting agencies to release to the OHRC any information requested by them in connection with the background investigation and processing of this application. I understand that failure to disclose all information completely and accurately may result in refusal to issue, denial, suspension, revocation or cancellation of this license and/or other disciplinary action by the Board of Stewards and/or the Commission. I have read and understand the foregoing statements and conditions and knowingly and voluntarily attach my signature hereunto.

	PRINTED Applicant's Name		
		Applicant's SIGNATURE	
STATE OF)			
) SS: COUNTY OF)			
Subscribed and sworn to before me this	day of	, 20	
(SEAL)		Notary Public	
My Commission Expires:		riotally I dolle	

STATE OF)	
STATE OF	
, of lawful Printed Name of Applicant	age, being first duly sworn upon oath, deposes and says
questions in the foregoing application and have authorize educational and other institutions, associates, all governmental agencies and ins release to the Law Enforcement Division of the	Oklahoma Horse Racing Commission), I have read the answered them truthfully, fully, and completely. I hereby my references, employers, business and professional trumentalities and all consumer reporting agencies to Oklahoma Horse Racing Commission or any of its Agents rts requested by the Law Enforcement Division of the ion with the processing of this application.
	PRINTED Applicant's Name
	Applicant's SIGNATURE
Subscribed and sworn to before me this da	ay of
(SEAL)	
	Notary Public
My Commission Expires:	·