

SUITE 7-701
JAMES R. THOMPSON CENTER
100 WEST RANDOLPH STREET
CHICAGO, IL 60601



TEL: 312 814-2600
TDD: 312 814-5039
FAX: 312 814-5062

ILLINOIS RACING BOARD

AFFIDAVIT OF GUARANTOR

TO: Illinois Racing Board of Stewards

I _____ (print name),

Address _____, say that I am

parent/legal guardian of minor child born on _____ I hereby

agree to accept full responsibility for any and all legal and financial obligations that

may be incurred on or off the association grounds relating to the racing of horses, owned

by son/daughter _____.

Signed,

Parent or Guardian

Subscribed and sworn to before me

This ____ day of _____, 20__.

NOTARY PUBLIC

(SEAL)

(Rev. 2/18/05-pr)