



HORSEMENS BOOKKEEPER CORPORATION
TRAINER AUTOMATIC DEDUCTION FORM

Gulfstream Park att: GPHBC 901 S FERDERAL HWY. HALLANDALE FLORIDA 33009
PHONE (954)457-6222 FAX (954)457-6592

Please return completed form to the Horsemen's Bookkeeper. 10% will be applied to Win, Place & Show winnings only.

The undersigned hereby notifies the horsemen's bookkeeper to deduct from my owner's account and deposit into the account of my trainer. 10% of the purse on 1st, 2nd & 3rd place monies on any horse in which I have an interest.

*Owner's Name: _____ STABLE _____

*Address: _____

*City: _____ State _____ Zip _____

*Phone No.: _____ EMAIL _____

List all racing partnerships in which you may have an interest:

*Owner Signature _____ *Effective Date: _____

***REQUIRED FIELDS**

Notary Acknowledgement

State of _____ County of _____

The foregoing instrument was acknowledged before me this _____ day of

_____, 20____. By _____.

Personally Known _____ Or Prduced identification _____.

Type or Print Name & STAMP BELOW

Notary Public Signature