## GULFSTREAM PARK HORSEMEN'S BOOKKEEPER SIGNATURE CARD

Please Print:				
Last Name:	First Name _		Account No	
Address:	City, St	ate, Zip:		
Phone: Home: ()	Busine:	ss: (	)	
Tax ID:	(AND/C	OR) SS #:		
Stable Name (If any):				
	Account Holder			
me (or the address that I provided you throu Bookkeeper of which address is my sole res Bookkeeper own account for Gulfstream Park satisfy any debt considered by Gulfstream Pa	Bookkeeper negligence or good error. I agree that a ugh the signed request) then maintained by the Gu iponsibility. I hereby agree that Gulfstream Park Ha k Horsemen's Bookkeeper's own benefit any or all of rk Horsemen Bookkeeper to be owed by me to Gulf ereby understood and agreed that Gulfstream Park policies related to Horsemen's	Ifstream Park Hoi lorsemen's Bookk f the funds contai stream Park Horse Horsemen's Boo	rsemen's Bookkeeper, the updating wi seeper has the absolute right to transf ned in my Gulfstream Park Horsemen's emen's Bookkeeper in any matter, whe	th the Gulfstream Park Horsemen fer to Gulfstream Park Horsemen Bookkeeper account at any time t other or not the debt is related to o
Owner's Signature:				
NAME	S.S. NUMBER / PASSPORT	D.O.B.	DRIVER LIC # & STATE	SIGNATURE
		-		
Terms and conditions of Account Holder	Agreement accepted and agreed.			
Owner's Signature:			Date:	
State )SS:  of )SS:				
personally known to me or proved t	before me, the undersigne o me on the basis of satisfactory evidence executed the same in his/her capacity,	e to be the ind	lividual whose name is subscrib	
Signature of Notary				