

**WEST VIRGINIA RACING COMMISSION RETIREMENT PROGRAM FOR BACKSTRETCH PERSONNEL
FOR MOUNTAINEER RACE TRACK**

ENROLLMENT FORM FOR THE 2011 PLAN YEAR (LICENSED AND WORKING IN SERVICE YEAR 2011)

Trainer proof of eligibility is proven by running a BRISNET 5105, Trainer Report. The cost is \$8.00 to be paid by applicant. The report must list proof of total starts from January 1, 2011 through December 31, 2011 inclusive.

All other applicants must provide a copy of proof of income of not less than \$10,000 from a West Virginia employer for work performed at Mountaineer Race Track and/or approved West Virginia training facilities and/or farms associated with racing at Mountaineer Race Track as evidenced by a Form W-2 and/or Form 1099 for the current Program Year, AND Federal Income Tax return with Schedule C for the current Program Year. FAILURE TO COMPLY WITH THESE REQUIREMENTS WILL RENDER AN INDIVIDUAL INELIGIBLE FOR THE RETIREMENT PROGRAM.

All applicants must attach a copy of your 2011 West Virginia Racing Commission Permit or 2011 photo ID issued by Mountaineer.

Choose ONLY one AND ATTACH COPY OF APPROPRIATE 2011 PERMIT OR 2011 PHOTO ID ISSUED BY MOUNTAINEER.

- Trainer Assistant Trainer Groom Pony Person
 Stable Person Hot Walker Exercise Rider

2011 WVRC License Type _____ 2011 WVRC License No. _____ Date Issued _____

First Name _____ Middle Initial _____ Last Name _____

Address _____

City _____ State _____ Zip Code _____

Phone Number (____) _____ Date of Birth _____ Age _____

Social Security Number _____ email: _____

Marital Status: SINGLE MARRIED SEPARATED DIVORCED

Did you miss any time during 2011 due to giving birth or adoption: YES NO (If yes, complete Form ML)

Do you participate in any private or public, non-self-funded retirement or pension plan? YES NO

Name of Retirement Plan _____

I understand that by completing this document and providing a copy of my West Virginia Racing Commission license and W2 or Form 1099 there is no guarantee that I will receive such an allocation since the program administrator for all applicants will impose other requirements in a uniform and non-discriminatory manner. By signing this form, I hereby certify that the information is correct and accurate to the best of my knowledge and that the W2 and/or Form 1099, and tax return that I presented is genuine and to the best of my knowledge and properly filed with the appropriate authorities under penalty of disqualification. By signing below, I agree to the release of my information to other racing entities for the tracking of eligibility for this and other retirement plans.

_____ Signature
Date

Reviewed by the Administrator: ELIGIBLE INELIGIBLE HOLD

By: _____ Date: _____