DAY AT THE TRACK
WAGERING APPLICATION

DATE OF APPLICATION _____

LAST NAME _____ FIRST NAME _____ M.I._____

RESIDENCE ADDRESS (NO P.O. BOXES) _____

CITY _____ STATE/REGION _____ COUNTRY _____ ZIP/POST _____

MAILING ADDRESS (OPTIONAL) _____

CITY _____ STATE/REGION _____ COUNTRY _____ ZIP/POST _____

SOCIAL SECURITY NUMBER ☐☐☐-☐☐-☐☐☐☐
(US RESIDENTS)

GOV'T ISSUED ID ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ REGION/COUNTRY ☐☐
(NON-US RESIDENTS)

DATE OF BIRTH ☐☐☐☐/☐☐/☐☐
(YYYY/MM/DD)

HOME TELEPHONE ☐☐☐☐☐☐☐☐☐☐

BUSINESS TELEPHONE ☐☐☐☐☐☐☐☐☐☐ EXT.☐☐☐☐

INCLUDE A **CLEAR AND LEGIBLE** PHOTOCOPY OF YOUR STATE-ISSUED DRIVER'S LICENSE OR GOV'T-ISSUED PASSPORT
(UNREADABLE COPIES OR APPLICATIONS RETURNED WITHOUT SUPPORTING DOCUMENTATION WILL BE REJECTED)

I CERTIFY THAT ALL INFORMATION IS CORRECT AND TRUE.

_____ _____
SIGNATURE DATE (MM/DD/YYYY)

SEND YOUR INFORMATION TO:

DAY AT THE TRACK
448 IGNACIO BLVD, #187
NOVATO, CA 94949
415-462-6702 - PHONE
415-382-1151 – FAX
EMAIL: CUSTOMERSERVICE@DAYATTHETRACK.COM