Horseman Purse Account Form

Select One:

☐ Original Account Setup ☐ Update to Existing Account

Type of Account:

☐ Owner ☐ Driver ☐ Trainer

CONTACT INFORMATION

If filling out by hand, please print legibly.

Name _____ Mobile Number _____

Address _____

_____

Email Address _____ USTA # _____

(NOTE: Email address is needed for ACH payment notification)

Signature _____ Date _____

RETURN

Email: horsebook@playmeadowlands.com Fax: (201) 460-4042

Mail: Attn: Horsemen's Bookkeeper
Meadowlands Racetrack
1 Racetrack Drive
East Rutherford, NJ 07073

OFFICE USE ONLY

Account # _____

Entered by _____

Date entered / updated _____