

	Complete this form	plete this form to register to bid:		
Date				
Purchases will be made in the name of				
Name of responsible party (if other tha				
Billing Address:				
SSN		or Passport No		
Home Telephone		Office Telephone		
Mobile		Email address		
Jockey Club Certificate Manager Name	· 	Email address	· '	
I want to contribute to NTRA (.25%)	Yes N	No		
Expected Amo	ount of Purchases	Method of Payment Personal Check Wire Tra Company Check Traveler Cashiers Check	nsfer 's Checks	
This section to be completed if y Payment is due 15 days after the last da hammer. The financial institution that Financial Information	ay of the sale. If you do not wish to	be invoiced, payment is expected w	within 60 minutes of the fall of the ease advise them.	
Name of Institution				
Address				
Telephone No				
Account No				
Officer to be Contacted				
By submitting this form and agreeing to investigation and if the applicant is not applicant's account pursuant to the Cor agree to comply with and abide by all p	an individual, the undersigned indindindings.	vidual agrees to be personally responding this form and agreeing to its tern	nsible to Keeneland for payment of the ns, applicant and responsible party	
I expressly agree and acknowledge as for hereunder; (b) I have received a copy of herein; (c) I consent to the processing of pursuant to this agreement is necessary	f and have read and agree to Keene If my personal data as an essential	land's Privacy Policy, the terms there part of this agreement; and (d) any p It between Keeneland and me and, f	eof being incorporated by reference	

interest in processing my data in the course of fulfilling its obligations hereunder.

Keeneland makes every effort to safeguard all personal data. However, the undersigned understands there are inherent risks associated with the transfer of personal data to Keeneland, including, without limitation, the risk of inadvertent or unauthorized use or disclosure or the risk of a security breach. By submitting this form and agreeing to its terms, the undersigned, after careful consideration of these risks, hereby expressly and voluntarily consents to the transfer and processing of his, her or its personal data on the terms and subject to the conditions set forth herein. The undersigned understands and acknowledges that the undersigned has the right to withdraw this consent at any time by emailing privacy@keeneland.com, and such withdrawal of consent will be effective immediately upon receipt by Keeneland.

The laws of the Commonwealth of Kentucky shall govern the construction of this registration form, the Conditions of Sale, and all rights, remedies and duties with respect to the purchase of horses and/or interests therein at Keeneland. In the event of any litigation arising out of the sale or the transactions contemplated hereby, the parties agree that any action or suit shall be brought in a court of record in the County of Fayette, Commonwealth of Kentucky, or in the United States District Court for the Eastern District of Kentucky, and the parties hereby consent to the venue and jurisdiction of such courts. The Seller, Consignor, Purchaser and Keeneland and their respective Agents, voluntarily and intentionally waive any right that they may have to a trial by jury in respect to any litigation arising from or connected with this Sale.

Signature of Applicant/Responsible Party	
Print Name of Applicant/Responsible Party	