

**BUREAU OF COUNTY FAIR AND HORSE RACING**

**THOROUGHBRED BREEDERS FUND  
APPLICATION TO RACE AT COUNTY FAIRS**

- Complete and submit the APPLICATION FOR FUNDS and the DATA ON TRACK FACILITIES forms.
- Submit **no later than FEBRUARY 15, 2012.**
- Review Rules on Thoroughbred County Fair Racing at the following link:  
<http://www.ilga.gov/commission/jcar/admincode/008/008002900C02150R.html>
- Review last year's County Fair Racing Schedule at the following link for additional Rules and information on racing:  
<http://www.agr.state.il.us/HorseRace/cfraceschedule.pdf>



**RETURN THIS FORM TO:**

ILLINOIS DEPARTMENT OF AGRICULTURE  
BUREAU OF COUNTY FAIRS & HORSE RACING  
STATE FAIRGROUNDS, P.O. BOX 19281  
SPRINGFIELD, ILLINOIS 62794-9281

FAX: 217/524-6194

<http://www.agr.state.il.us/HorseRace/index.html>

If you have any questions regarding the above information,  
please call us at (217) 785-0106 or e-mail us at [kelly.beck@illinois.gov](mailto:kelly.beck@illinois.gov) .

**ILLINOIS THOROUGHBRED BREEDERS FUND**  
**APPLICATION FOR FUNDS**

**FOR ILLINOIS CONCEIVED AND FOALD THOROUGHBRED RACES AT COUNTY FAIRS**

1. The undersigned being the Secretary of the \_\_\_\_\_ Fair Association requests an allotment of funds by the Department of Agriculture for the following proposed thoroughbred races to be offered at their county Fair during the year 20\_\_\_\_.

2. Name of Fair Association: \_\_\_\_\_

3. Location of Fairgrounds: \_\_\_\_\_  
(County) (Township) (City)

4. Dates of Fair: \_\_\_\_\_ to \_\_\_\_\_  
(month) (day) (month) (day)

5. Proposed number of races to be offered with purses to be paid from this Fund \_\_\_\_\_

6. Number of permanent horse stalls available \_\_\_\_\_

7. Type or conditions of races to be offered \_\_\_\_\_

AGE	SEX	DISTANCE	PURSE

8. Date entries close (48 hours): \_\_\_\_\_

9. Date(s) races to be offered: \_\_\_\_\_ Post time: \_\_\_\_\_

10. Person to whom entries at to be made: \_\_\_\_\_  
(Name) (Title)

(address) (city, state, zip) (tel. # for phoned-in entries (area code included))

11. The \_\_\_\_\_ Fair Association hereby agrees to abide by and follow the RULES AND REGULATIONS of the Department of Agriculture for County Fair thoroughbred races under the provisions of the Illinois Horse Racing Act of 1975.

12. Submitted by: \_\_\_\_\_  
(Secretary of County Fair Association)

Address: \_\_\_\_\_  
(street) (city, state, zip)

\_\_\_\_\_  
(area code and telephone number) Dated: \_\_\_\_\_

Note: This application must be filed with the Department of Agriculture **on or before February 15** of the year of requested dates along with the attached track data form.

County Fair Associations shall not schedule or advertise Illinois Thoroughbred Conceived and Foaled races, purses to be paid by the State of Illinois under the provisions of the Illinois Horse Racing Act of 1975, until officially notified by the Department of Agriculture as to the allocation of funds and approval of the Illinois Conceived and Foaled races to be offered.

**Mail To:**

Illinois Department of Agriculture, Bureau of County Fairs and Horse Racing, P.O. Box 19281, Springfield, Illinois 62794

**DATA ON TRACK FACILITIES**

Name of Fair: \_\_\_\_\_

Location of Fairgrounds: \_\_\_\_\_  
(county) (township) (city)

- 1. What type of racing will be offered during your fair other than thoroughbred races? \_\_\_\_\_
- 2. What is the circumference of your track in terms of a mile or furlongs? \_\_\_\_\_
- 3. Type of soil? \_\_\_\_\_ Depth of "cushion" to be provided? \_\_\_\_\_
- 4. What process will be employed in conditioning the surfaces of the track for Illinois Conceived and Foaled thoroughbred racing? \_\_\_\_\_
- 5. Width of stretch turns? \_\_\_\_\_ Width of backstretch? \_\_\_\_\_  
Length of homestretch? \_\_\_\_\_ Width of homestretch? \_\_\_\_\_
- 6. Is your track completely equipped with inside rails? \_\_\_\_\_  
If completely equipped, state height and type of rail: \_\_\_\_\_
- 6a. If partially equipped with inside rails, describe location of rails in relation to the track proper and the height and type of rail: \_\_\_\_\_
- 6b. Are the inside rails hub or bumper type? \_\_\_\_\_
- 7. Is your track completely equipped with outside rails or fence? \_\_\_\_\_  
If completely equipped, state type and height of rails or fence: \_\_\_\_\_
- 7a. If partially equipped with outside rails, describe location of rails in relation to the track proper and the height and type of rail: \_\_\_\_\_
- 8. If your track is not completely equipped with inside rails and/or outside rails or fence, state what improvements will be made, if any, prior to the dates proposed for Illinois Conceived and Foaled Races to be ran at your county fair:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PLEASE NOTE:** Application for funds for Illinois Conceived and Foaled races will not be considered by the Department of Agriculture unless this questionnaire has been completely executed and submitted along with the Application for Funds.

- 9. Submitted by: \_\_\_\_\_  
(signature and title)
- \_\_\_\_\_
- (street address)
- \_\_\_\_\_
- (city, state, zip)
- \_\_\_\_\_
- (area code and telephone number)