



<b>BUSINESS OFFICE USE ONLY</b>
_____
Account #

A Service of eBet Technologies, Inc.

**HORSEPLAYERSBET.COM**

**Suite C-4**

**6130 NE 78<sup>th</sup> Court**

**Portland, OR 97218**

**Telephone: 1-877-782-9994 • Fax: 503-253-0140**

**Account Application/Identification Verification**

(Requirement of Oregon Racing Commission 462-210-0030)

\_\_\_\_\_  
Last

\_\_\_\_\_  
First

\_\_\_\_\_  
Initial

\_\_\_\_\_  
Residential Street Address (cannot use P.O. Box)

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Mailing Address (if different from residential)

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip Code

\_\_\_\_\_  
Telephone Number (including area code)

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
E-mail Address

\_\_\_\_\_  
Date of Birth (Month-Day-Year)

\_\_\_\_\_  
State Driver's License # or State Issued ID

\_\_\_\_\_  
Expiration Date (Month-Day-Year)

FILL IN PASSWORD/SECURITY CODE, USING AT LEAST 4 BUT NO MORE THAN 10 ALPHA/NUMERIC CHARACTERS

\_\_\_\_\_

FILL IN PERSONAL ID NUMBER (PIN) USING 4 NUMBERS

\_\_\_\_\_

***I certify that I am 18 years of age or older and I have read and agree to abide by the HorseplayersBet.com Terms & Conditions included with this application.***

I also give consent to HorseplayersBet.com and its agents (including, not limited to, eBet Technologies, Inc.) to perform any and all verifications that may be necessary, to include obtaining information from credit reporting agency(s).

I understand that neither HorseplayersBet.com nor its agents (including, but not limited to, eBet Technologies, Inc.) makes no warranties with regard to the services to be provided hereunder, including warranties of merchantability or fitness for a particular purpose. In no event shall HorseplayersBet.com or its agents (including, but not limited to, eBet Technologies, Inc.) be responsible for damages of any kind including consequential damages, arising out of the services to be provided, even if HorseplayersBet.com or its agents (including, but not limited to, eBet Technologies, Inc.) were aware of the possibility of such damages prior to providing such services.

I certify that the information provided herein is true and accurate.

\_\_\_\_\_  
Account Holder Signature (required by all account holders)

\_\_\_\_\_  
Date

\*\*\*\*\*

Once you have completed **AND SIGNED** the application, submit it to:

HorseplayersBet.com Business Office  
Suite C-4  
6130 NE 78<sup>th</sup> Court  
Portland, OR 97218  
Telephone: 1-877-782-9994 • Fax: 503-253-0140