

NEW MEXICO HORSEMEN'S ASSOCIATION

COVID-19 Hardship

Request for Funds

Name: _____ **Telephone:** _____

Address: _____

New Mexico State Racing Commission License# _____ Date Issued _____

Owner _____ Trainer _____ Owner/Trainer _____

Please note: In consideration of your request for funds, the New Mexico Horsemen's Association will be the payer of last resort. Other funding sources must be exhausted first.

Please respond to all the following questions in their entirety.

Have you applied for small business association Covid19 relief funds? Yes No

Have you applied for other local, state and/or federal relief funds? (i.e. stimulus packages or unemployment). Yes No

Are you a New Mexico Resident? Yes No

If No, have you applied for relief through your state of residence? Yes No

Have you been denied relief from any of the sources above? Yes No

Do you pay stall rent in New Mexico? Yes No

Do you have training bills? Can you provide copies of these bills? Yes No

Do you have copies of 1099's or W2's for 2019? Yes No

Are you paying day money? Yes No

Are you receiving day money? Yes No

How many horses do you have in active training?

Are the horses still in the care of the trainer, or have they been taken by the owner?

Where are these horse currently stabled?

How many employees do you have?

Provide the track name where your horses last ran.

Are your horses currently race ready or have they been laid off?

| <u>Name of Horses</u> <i>(Please use Additional Pages if Necessary)</i> | <u>Number of starts/date of last workouts/last race</u> | <u>Trainer Name</u> | <u>Owner Name</u> |
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Reason for Hardship (brief explanation)

Signature of Applicant _____ **APPROVED**

Date _____ **DENIED**

You will be required to present all documentation requested. *Please remember, the NMHA will only be the payer of last resort. In other words, all other available funding sources must be exhausted prior to consideration of your application for funds.*

Please submit you application either on-line; <https://newmexicohorsemen.com> ; via email at ; nmhastate1@aol.com or U.S. Mail; NMHA, P.O. Box 8695, Albuquerque, NM 87198-8695