

Harness Racing New Zealand Inc.
 PO Box 459
 Christchurch 8140
 Facsimile: (03) 964-1205

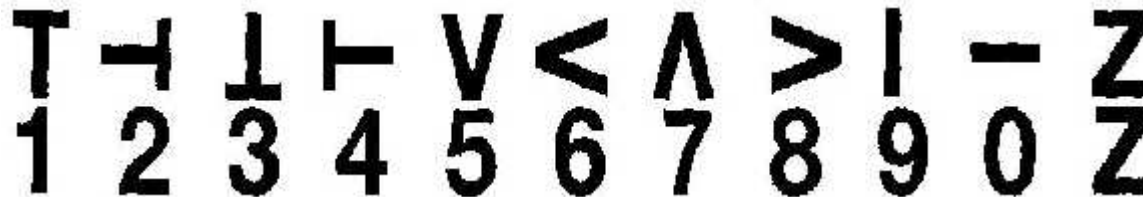
TRAINER NOTIFICATION FORM

FAX TO 03 964 1205

IN ACCORDANCE WITH THE PROVISIONS OF RULE 502 OF THE NZ RULES OF HARNESS RACING, I WISH TO ADVISE THAT I AM TRAINING THE FOLLOWING HORSES:

Name of Horse	Sex	Brand	Pedigree Sire and Dam	Owners Name	Colours Specify Owner or Trainer colours

BRAND SYMBOLS
and corresponding numbers



IMPORTANT NOTE: All details required on this form must be completed, including the Brand. This form will **NOT BE PROCESSED**, unless all details are provided. By signing the form, you are declaring that the brand has been checked off the horse's neck, and details are true and correct.

TRAINERS NAME:

ADDRESS:

Date _____ Signature _____ Contact Telephone (0) _____