



APPLICATION TO TRAIN HORSES BY VISITING TRAINER

(not applicable to interstate horses travelling directly from their home stable to and from a race meeting)

I hereby apply to train the undermentioned horses under Rules of Harness Racing NSW -

For the period from _____ To _____

Full Name (block letters) _____ Staying with Trainer _____

Address _____ Stable Address _____

Licensed by _____ Mobile No _____

Person in charge in your absence _____

Name of Horse/s	Name of Horse/s	Name of Horse/s

Stable Employees:

Name	Type of Licence

Declaration: I declare all information provided is complete and correct. I agree to observe and be bound by the Rules of Harness Racing NSW.

Signed: _____ Date: ___/___/___

Stewards: _____ Date: ___/___/___

Submit this Application Form by:
 Fax: 02 8580 5794
 Email: stewards@hrnsw.com.au