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HORSE MOVEMENT

In terms of Rule 71A:

A Trainer is to notify the Veterinarian of the HRD within 24 hours in writing on the prescribe form, when a horse travels to and fro between their stable, any other place or the Racecourse for the purpose of racing, resting or any other purpose.

NOTES:

1. The Trainer responsible for the Training Establishment must please complete this form accurately, in block letters.

2. The movement of he please be reported on			g establishments belonging to the same Trainer must
NAME OF TRAINER:		TRAINING CENTRE:	
ARRIVALS: The following	g horses l	have entered my	stables:
NAME OF HORSE/ MICROCHIP NUMBER	SEX	DATE OF ARRIVAL	NAME OF PERSON PREVIOUSLY RESPONSIBLE FOR THE HORSE
DEPARTURES: The follow	ving hor	ses have left my	stables:
NAME OF HORSE/ MICROCHIP NUMBER	SEX	DATE OF DEPARTURE	NAME OF PERSON, ADDRESS AND MOBILE NUMBER TO WHOM THE HORSE WAS SENT
I certify that the above information is correct for all horses that entered my stables or left my stables.			
SIGNATURE			DATE: