

equipment/s on my charge in its future outings :

- | | |
|--------------------|---------------------------|
| a) Blinkers | e) Dropped Nose Band |
| b) Hood | f) Hanging Bit/Basket Bit |
| c) Tounge Strap | g) Pacifier Blinkers |
| d) Cross Nose Band | h) Others (Specify) |

(Strike out whichever is not applicable)

Particualrs of last Five runs completed with / without the equipment.						
Sl.No.	Centre	Date	RaceNo.	Distance	Rider	Placing
1						
2						
3						
4						
5						

Reasons for the requested change :

The said horse has been given practice with / without the equipment on the following dates:

Sl. No.	Date	Track	Ridden by
1			
2			
3			
4			
5			

.....
Signature of Trainer

Space for Office Use :

Application received on

.....
Racing Superintendent

Starters Remarks:

Date.....

Signature

PERMITTED / NOT PERMITTED

.....
Chief Stipendiary Steward