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(HARNESS) ACCEPTANCE FORM

CLUB NAME:	DATE OF MEETING: 2 Horses Trained in Other States or Overseas				
Tick one: 1 Local Trained Horses					
(Where number 2 ticked, the Stable Re the day of nomination.	turn and gear form must a	accompany nomination	n and clearance must be rece	ived by the Controlling Bo	dy before 8:30am on
NAME OF HORSE	DRIVER	CONCESSION DRIVER (CLAIMING PLEASE TICK)	RACE CODE (1 ST PREF)	RACE CODE (2 ND PREF)	CLAIMING PRICE
I declare that the details supplied on this form are true and correct. I agree to the Controlling Body reserving the right to alter any of the details or conditions of any race or the handicap of any horse or to			Signature of Nominator: Qualification of Nominator: Owner/Trainer/Authorised Agent (cross out words not applicable)		
prohibit or prevent any horse from start			Name of Trainer:		
Racing Queensland Limited A.B.N. 52 142 786 874 Racecourse Rd Deagon QLD 4017 PO Box 63 Sandgate QLD 4017 T 07 3869 9777 F 07 3269 6715			Address:		

Phone Number:

Date: