



## NOTIFICATION OF CONDITION AND TREATMENT OF A HORSE

NAME OF HORSE: \_\_\_\_\_

CLUB: \_\_\_\_\_ DATE OF MEETING: \_\_\_\_\_

TRAINER: \_\_\_\_\_

CONDITION TREATED: \_\_\_\_\_

TREATMENT: \_\_\_\_\_

DATE(S) OF LAST ADMINISTRATION: \_\_\_\_\_

\_\_\_\_\_

PERSON WHO ADMINISTERED THE LAST TREATMENT: \_\_\_\_\_

SIGNATURE OF TRAINER: \_\_\_\_\_ DATE: \_\_\_\_\_

PRE-RACE VETERINARY CHECK OR INSPECTION OF THE CONDITION: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_