

To : Dr _____
Official Veterinary Surgeon
_____ Turf Club

**REQUEST FOR IDENTIFICATION
PRIOR TO REGISTRATION**

I _____ would like to register the following horse/s to be identified as required under Rule 76 of the MRA Rules of Racing. The horses are: -

NAME	DESCRIPTION	SIRE	DAM	DATE OF IMPORTATION
1.				
2.				
3.				
4.				
5.				

.....
NAME OF TRAINER

.....
SIGNATURE OF TRAINER

.....
DATE OF REQUEST