

EXERCISE LAD	LICENCE NO	EXERCISE LAD	LICENCE NO

THE FOLLOWING GROOM/S STABLE LAD/S WERE HIRED / LEFT MY EMPLOYMENT SINCE MY LAST REPORT.

NAME OF GROOM / STABLE LAD	LICENCE NO	DATE EMPLOYED	LICENCE NO

TRAINER FULL NAME IN BLOCK LETTERS

Trainer Signature

FOR OFFICIAL USE ONLY: <hr/> Date Received: _____ <hr/> Signature of Officer: _____ <hr/>
