OVERNIGHT STABLING AND ACCOMMODATION BOOKING FORM

RACECOURSE:……..……..

DATE OF MEETING:…….…….

NAME OF TRAINER:…….…….

I would like to book stables for the following horses declared to run on ……:

- *Trainers are asked to be aware that horses declared to run the following day will be given preference.*
- *Trainers are asked to be aware that racecourses may charge them for facilities used by travelling horses*
- *Please state if horses are colts/fillies/gelding*

1)…….…….

2)……..

3)…….……..……..

4)…….…….....

5)……..

6)…….....

7)…….....

8)……..

I would like to book stables for the following travellers

1)…….…….

2)……..……....

3)…….....

4)……..

Type of Bedding Required : Paper / Shavings / Nothing (please circle preference)

I would like to book accommodation for the following staff *(please state if any are your senior staff)*

1)…….....….. m/f

2)……..…….. m/f

3)……..…….. m/f

4)……. …….. m/f

Date of Arrival……. **Date Of Departure**……

Time of Arrival…… **Time of Departure**……..

Contact Mobile Telephone Number of Travelling Staff: ……

Please state any other information which the racecourse should be aware of:

……

……

Signature/Name:…….. **Date**:……..

In the event of any difficulty please call the Clerk of the Course or the Stable Manager at the relevant racecourse

In accordance with Rules of Racing – Trainer Manual (C) Part 3 - 42.1 this form should be returned to the racecourse by no later than 1pm, on the day before racing.