



APPLICATION TO SHIP IN

Please fill out and email to Horse Racing Alberta 48 hours prior to arrival at security@thehorses.com and to the Race Office - _____.

DATE AND APPROXIMATE TIME OF ARRIVAL: _____

SHIPPER: _____ TRAINER: _____ Phone: _____

Horses registered name	Owner/Trainer	Tattoo or microchip number	Color	Sex	For office use		
					Registration papers	Coggins test	Authority initials

NOTE: THIS IS FOR ALL HORSES SHIPPING INTO RACETRACK FACILITIES DURING TRAINING OR RACING.