



APPLICATION FORM FOR REGISTRATION INTO THE BOOKS FOR PARTICIPANTS AND OWNER

NDR, Postbox 60, NL-2240 AB Wassenaar

Surname:

Christian name(s):.....

Date of birth:**Place of birth:**.....

Address:.....

Residence:.....

Code:

Number of passport or driver licence:.....

Please include a copy of the document

E-mailaddress:.....

Telephone:.....**Fax:**

Mobile:.....

Iban bank:

Please indicate:

Will you participate in A trotting

B racing

C arabian racing

Were you registered before with our organisation: yes

no

He/she declares:

- a. To submit to all regulations of the Dutch Trotting and Racing Association (NDR)
- b. To have knowledge of all obligations originating from submission to all regulations
- c. Deficit will be transferred
- d. signatory states NDR membership

Signature:**Date:**