
SER 3 - Notification of Termination of Employment



This form is to be returned to the Racing Calendar office, at the following address, as required under Schedule (C) 2 of the Rules of Racing:

**Racing Administration
Weatherbys
Sanders Road
Wellingborough
Northants
NN8 4BX
Tel: 01933 440077 (Ext 2326)
Fax: 01933 304819**

Name of Trainer:

Employee Details

Surname:

Forename(s)

Date of Birth:

Stable Employee Number (if known):

Exact date employment was terminated:

At least one of the following must be confirmed:

A Racecourse Attendant's Identity Card and Validity Pass was not issued for this employee whilst in my employment

The Racecourse Attendant's Identity Card and Validity Pass issued for the above named employee are returned herewith

I also enclose the Apprentice/Conditional Jockey's Licence that was issued whilst in my employment

Trainer's signature:

Date:

OR

Authorised Agent's signature:

Date