



Racing Commissioner
Office of Racing Commissioner
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www.michigan.gov/horseracing

Office of Racing Commissioner CORNELL COLLAR

Date		
Horse Name		Tattoo No.
Color	Sex	Year Foaled
Trainer (Printed)		Trainer (Signature)
Diagnosis		

I have instructed the above named trainer in the proper placement of the Cornell Collar.

Veterinarian (Printed)	Veterinarian (Signature)
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OFF CORNELL COLLAR INFORMATION

Off Date	
Reason	
Veterinarian (Printed)	Veterinarian (Signature)