



State of Michigan  
 Michigan Gaming Control Board  
 Office of the Executive Director  
 Horse Racing Section  
 3062 W. Grand Blvd., L-700  
 Detroit, MI 48202  
 Phone: (313) 456-4100  
 Fax: (313) 456-2864  
 www.michigan.gov/mgcb

# REGISTRATION OF SHOCK / RADIAL PULSE THERAPY EQUIPMENT

<b>Licensed Veterinarian (Printed)</b>		<b>MI Vet License No.</b>	
<b>Address</b>			
<b>City</b>	<b>State</b>	<b>Zip Code</b>	
<b>Manufacturer of Equipment</b>		<b>Model No. / Serial No.</b>	
<b>Date of Purchase</b>			

I certify that the equipment will be used in compliance with the Michigan Gaming Control Board, Office of the Executive Director, Horse Racing regulations.

_____	_____
<b>Veterinarian (Signature)</b>	<b>Date</b>
_____	_____
<b>Veterinarian (Signature)</b>	<b>Date</b>
_____	_____
<b>Veterinarian (Signature)</b>	<b>Date</b>
_____	_____
<b>Veterinarian (Signature)</b>	<b>Date</b>