



機密 CONFIDENTIAL

要求額外墊料申請表  
ADDITIONAL BEDDING REQUEST FORM

本表格適用於每匹馬及馬廐要求額外墊料即多於每週分配的六包木糠、報紙或禾草（獸醫另有指示除外）。

This form applies if Livery Holder(s) require extra bedding above the weekly allocation of 6 bales of either shavings, paper or straw (unless otherwise stipulated by a Veterinary Surgeon) per horse and box.

會員姓名  
Member's  
Name: \_\_\_\_\_

會員號碼  
Membership  
No: \_\_\_\_\_

另一位會員姓名  
2<sup>nd</sup> Member's  
Name: \_\_\_\_\_

會員號碼  
Membership  
No: \_\_\_\_\_

馬匹名稱  
Horse Name: \_\_\_\_\_

馬匹號碼  
Horse No: \_\_\_\_\_

馬廐號碼  
Box No: \_\_\_\_\_

Paper 報紙

Shavings 木糠

Straw 禾草

要求日期  
Date requested: \_\_\_\_\_

要求時段  
Period  
requested: \_\_\_\_\_

每日/週 額外包數 Extra bags per day / week:	每月 額外包數 Extra bags per month:	單位價格 Unit price:	總數 Total amount:	共養馬主之總數 Total amount (shared Livery):



額外墊料費用之總數將會向會員收取，如共養馬匹之會員均同意此要求並填妥本表格，其費用將平均收取。

Costs for extra bedding will be charged to the Member whom applied (total amount).

Members that share livery can be charged separately if both parties give permission by completing this form.

會員簽署  
**Member's  
Signature:** \_\_\_\_\_ **日期  
Date:** \_\_\_\_\_

另一位會員簽署  
**2<sup>nd</sup> Member's  
Signature:** \_\_\_\_\_ **日期  
Date:** \_\_\_\_\_

處理職員  
**Handled  
by:** \_\_\_\_\_ **日期  
Date:** \_\_\_\_\_

此表格必須於生效日期前遞交，並經高級馬術組長安排

Orders must be placed with Senior Equestrian Supervisors by submitting this form in advance of the date requested.

在向本會提供本表格內的個人資料之前，請先細閱有關個人資料(私隱)條例的通告，當中已述明限制本會使用有關資料的規定。該通告可見於交表櫃台和/或 [http://www.hkjc.com/chinese/corporate/corp\\_privacy.asp](http://www.hkjc.com/chinese/corporate/corp_privacy.asp)

Prior to providing the personal data sought on this form, please read our Notice relating to the Personal Data (Privacy) Ordinance which restricts our use of this data. The Notice can be found at the submission counter and / or on [http://www.hkjc.com/english/corporate/corp\\_privacy.asp](http://www.hkjc.com/english/corporate/corp_privacy.asp)