



RACING AND WAGERING WESTERN AUSTRALIA

AUTHORITY TO LODGE A CLAIM (ON BEHALF OF ANOTHER PERSON)

Pursuant to the RWAA Rules of Harness Racing Rule 73 (1) (b)

- Use this form to appoint a person as an agent to act on behalf of the claimant when the claimant is unable to attend the race meeting.
- This completed authority must be attached to the completed Harness Claiming Race Transfer of Ownership Notification when it is lodged at the race meeting.

| | | | | |
|--|------------|--------------|-------|-----------|
| Claimant's Name: | Surname | Given Names | | |
| Address | Street No. | Street Name | State | Post Code |
| Claimant's Signature: | | Date: | | |
| I hereby authorise the person below to act on my behalf and submit a claim for the horse as specified on the attached Harness Claiming Race Transfer of Ownership Notification. I also acknowledge that this authorisation does not in any way abrogate my responsibilities under the Rules. | | | | |
| NAME OF HORSE BEING CLAIMED: | | | | |

| DETAILS OF AUTHORISED PERSON (Must be 18-years or older) | | | | |
|--|------------|--------------|-------|-----------|
| Agent/Person's Name: | Surname | Given Names | | |
| Address | Street No. | Street Name | State | Post Code |
| Agent/Person's Signature: | | Date: | | |

A CLAIM IS VOID IF THE CLAIMANT OR AGENT IS NOT PRESENT AT THE TIME THE CLAIM IS DETERMINED.

| Office use only | | | |
|-------------------------------------|--|--------------|--|
| Steward-In-Charge Signature: | | Date: | |

Licensing & Registrations Department
14 Hasler Road OSBORNE PARK WA
Telephone (08) 9445 5558
Facsimile (08) 9445 5586