



RACING AND WAGERING WESTERN AUSTRALIA

ABN 21 347 055 603

Licensing & Registrations
14 Hasler Road Osborne Park WA 6017
Telephone (08) 9445 5558
Facsimile (08) 9445 5586

FEE \$50



NOTIFICATION OF CHANGE TO
SYNDICATE MEMBERSHIP
(OTHER THAN A COMPANY SYNDICATE)



If transferring, Part C (including the Member Declaration) to be completed by Incoming Member.
If relinquishing, the percentage of membership held by the Outgoing Member shall be redistributed evenly amongst remaining members unless otherwise instructed in writing by the Outgoing Member and Manager,

SYNDICATE NAME:

PART A: (OUTGOING MEMBER)

Mr/Mrs/Ms/Miss

SURNAME

GIVEN NAMES

TELEPHONE NUMBER (BUSINESS HOURS)

HEREBY NOTIFY THAT I AM RELINQUISHING/TRANSFERRING TO

NAME OF PERSON RECEIVING SHARE (IF APPLICABLE)

MY MEMBERSHIP AND SHARE OF WITHIN THE ABOVENAMED SYNDICATE.

PERCENTAGE/NO. OF SHARES

SIGNATURE OF OUTGOING MEMBER:

DATE:

PART B: (MANAGER)

I HEREBY ACKNOWLEDGE THAT THE ABOVENAMED MEMBER IS RELINQUISHING/TRANSFERRING THEIR MEMBERSHIP OF THE ABOVENAMED SYNDICATE AS INDICATED ABOVE AS PER ATTACHED CORRESPONDENCE SIGNED BY THE OUTGOING MEMBER AND MYSELF.

Mr/Mrs/Ms/Miss

SURNAME

GIVEN NAMES

TELEPHONE NUMBER (BUSINESS HOURS)

POSTAL ADDRESS:

No:

STREET

SUBURB

POST CODE

EMAIL ADDRESS:

@

SIGNATURE OF SYNDICATE MANAGER:

DATE:

PART C: (INCOMING MEMBER)

I HEREBY ACKNOWLEDGE THAT I AM ASSUMING MEMBERSHIP AND SHARE WITHIN THE ABOVE NAMED SYNDICATE.

Mr/Mrs/Ms/Miss

SURNAME

GIVEN NAMES

TELEPHONE NUMBER (BUSINESS HOURS)

DATE OF BIRTH:

POSTAL ADDRESS:

NO:

STREET

SUBURB

POST CODE

EMAIL ADDRESS:

@

MEMBERS DECLARATION:

AS A SIGNATORY TO THIS APPLICATION I DECLARE THAT I AM OVER 18-YEARS OF AGE AND AM NOT UNDISCHARGED, BANKRUPT OR DISQUALIFIED UNDER ANY RULES OF RACING AND FURTHER DECLARE THAT I HAVE READ AND AGREE IN ALL RESPECTS TO BE BOUND AND COMPLY WITH THE RWWA RULES OF THOROUGHBRED RACING. I FURTHER AGREE THAT IF I HAVE BEEN CONVICTED OF OR HAVE A PENDING CHARGE AGAINST ME FOR A CRIMINAL OFFENCE OR HAVE BEEN CONVICTED OF AN OFFENCE UNDER THE RWWA RULES OF RACING (THOROUGHBRED, HARNESS OR GREYHOUND) OR THE RULES OF ANY OTHER RACING JURISDICTION IN THE PAST TEN YEARS, I WILL NOTIFY THE DEPUTY REGISTRAR IN WRITING WITH THIS APPLICATION AND AGREE THAT SUCH NOTIFICATION MUST INCLUDE FULL DETAILS OF THE CONDUCT IN QUESTION.

Signature of Incoming Member

Date

NUMBER OF EQUAL SHARES IN THE SYNDICATE: _____

NUMBER OF SHARES TO BE OWNED BY INCOMING MEMBER: _____

TOTAL MONTHLY FEE PAID BY INCOMING MEMBER EACH MONTH \$ _____ OF WHICH NOT MORE THAN

\$ _____ SHALL BE PAID TO THE MANAGER FOR HIS/HER SERVICE.