



RACING AND WAGERING WESTERN AUSTRALIA

ABN 21 347 055 603

Licensing & Registrations
14 Hasler Rd OSBORNE PARK WA 6017
Telephone 08 9445 5558
Facsimile: 08 6314 4792
Email: licreginfo@rwwa.com.au

FORM H – Transfer of Ownership Greyhound

TRANSFER FEE \$34.00
Un-named Greyhound Transfer Fee: Nil

- This document together with the prescribe fee, must be lodged with the Greyhounds Registration Certificate within 10 days of purchase or acquisition.
NEW: Where a Greyhound Identification Card has been issued by RWWA, the card must be delivered/ handed to the new owner/purchaser(s) and only the Transfer of Ownership Form together with the prescribed fee must be lodged within 10 days of purchase or acquisition.
Any alterations to the transfer must be initialled by the Manager (correction fluid or tape will render the transfer unacceptable).
A Manager must be appointed when there is more than one transferee. The Manager must be a Transferee.
If any transfer is being signed under Power of Attorney or Letter of Authority, a copy of such authority must be provided when lodging the transfer.

All Current Owners/Sellers to complete this side of form
Purchaser/s to complete reverse side of this form

I/We, as listed below, Transferor/s, being the owner/s of the Greyhound:

Form with fields: NAME OF GREYHOUND, MICROCHIP NUMBER, COLOUR, SEX, EAR BRAND

Hereby advise that the said Greyhound was transferred to the person/s name on the reverse side of this form on:

DATE OF TRANSFER:

and this/these person/s is/are now sole owner/s of the Greyhound in law and in equity.

Table with 4 columns: NAME OF TRANSFEROR/S (Seller/s), SIGNATURE OF TRANSFEROR, NAME OF WITNESS (PLEASE PRINT DETAILS), SIGNATURE OF WITNESS. Includes rows for 1-4 and SYNDICATE NAME.

If the Greyhound is nominated / engaged for a race meeting please enter venue and date:

Venue: Date:

I /WE the above named do solemnly and sincerely declare that the above named Greyhound: (Strike out incorrect statement in bold)

- 1. Has / Has not ever, been suspended for marring, fighting or failing to pursue
Where the Greyhound has been suspended previously for marring, fighting or failing to pursue please list details of all penalties (e.g. Date, venue and type of offence and penalty issued):
2. Has / Has not ever, been found to be suffering from an illness or condition which affects or may affect its central or peripheral nervous systems or any part of that system, and has / has not been placed on a trial under Rule 104.

I/WE the above named do solemnly and sincerely declare that:

- 1. Neither the Greyhound named herein nor ourselves are at present the subject of any disqualification, suspension or injury of any Racing Controlling Body or Club.
2. I/WE are not aware of any fact, occurrence or permanent condition that would render the Greyhound named herein to be ineligible, incapable or otherwise that would prevented it, from competing in an event.

RWWA PRIVACY POLICY

Please refer to RWWA's Privacy Policy on www.rwwa.com.au

<b>NAME OF GREYHOUND:</b>	
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**PURCHASER/S MUST COMPLETE THIS SIDE OF FORM**

(A COMPLETED **RWWA GST DECLARATION FORM** MUST BE LODGED WITH THIS TRANSFER BY THE MANAGER)

- The Rules of Racing make it compulsory for all transfers of ownership to be recorded in respect of registered Greyhounds. A Transfer of Ownership is not official until approved and signed by the Registrations Officer of RWWA in whose area the Greyhound is to race.
- The first named person appearing in the acquiring section shall be recorded as the **Racing Manager** and all correspondence and payments shall be sent to that person unless otherwise stated.

**NB: All members of a group must complete and sign. The Manager and one other member of syndicate must sign.**

NAME OF TRANSFEREE/S (Purchaser/s) (NAME IN FULL – BLOCK LETTERS)	TELEPHONE	SHARE %	DATE OF BIRTH	SIGNATURE
<b>1. Manager:</b>				
<b>Address:</b>				
<b>2.</b>				
<b>Address:</b>				
<b>3.</b>				
<b>Address:</b>				
<b>4.</b>				
<b>Address:</b>				
<b>SYNDICATE NAME</b> (if applicable)				

*(Note: It is a requirement that all persons listed above are the holders of a current owner's registration/licence from the Controlling Body in the State/Territory in which they reside)*

*Rule 117 of the RWWA Rules of Greyhound Racing requires that a person who purchases or otherwise acquires a Greyhound that has been registered with RWWA or an approved Racing Controlling Body shall **within 10 days** of purchasing the Greyhound make application to RWWA.*




I/We declare that the GST and banking details on the accompanying GST Declaration Form are true and correct, and authorise the payment of race earnings to the account stated in the Bank Account Details section of the form. I/We agree to be bound by the Racing & Wagering Rules of Greyhound Racing. I/We declare the information contained in this Transfer is true and correct. I/We declare that I/We have not been convicted of any criminal offence under my/our own name or any other name, or have any criminal charge pending in Australia or elsewhere, or have been convicted of an offence under the RWWA Rules of Racing (Harness, Thoroughbred or Greyhound) or the Rules of any other racing jurisdiction. **IF A TRANSFEREE CANNOT MAKE THIS DECLARATION HE/SHE MUST CONTACT RWWA STEWARDS.**



**GST DECLARATION**  
*Must be completed*

FULL NAME .....

Please tick ✓ where applicable

 Harness <input type="checkbox"/>	 Thoroughbred <input type="checkbox"/>	 Greyhound <input type="checkbox"/>
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**Section A:**

Are you a resident of Australia for income taxation purposes?  Yes Go to section B  No Go to section D

If you have answered No, then we are obligated to withhold amounts under the Foreign Resident Withholding provisions.

**Section B:**

Is the horse racing activity conducted as a private recreational pursuit or hobby?

Yes Go to section D  No Go to section C

If you have answered Yes, an ABN cannot be provided and you must declare yourself as a Hobbyist.

**Section C:**

Where the participant is GST registered the following agreement is given:

**AGREEMENT FOR THE ISSUE OF RECIPIENT CREATED TAX INVOICES**

Between

Racing and Wagering Western Australia ("Recipient") ABN: 21 347 055 603 14 Hasler Road, OSBORNE PARK WA 6017

And

The Signatory (referred to as the "Supplier")

**Terms and Conditions**

The Supplier and Recipient agree that:

1. The Recipient may issue tax invoices in respect of supplies made by the Supplier;
2. The Supplier may not issue tax invoices in respect of supplies made by the Supplier;
3. The Supplier acknowledges that it is registered for GST when it enters into this Agreement and it will notify the Recipient if it ceases to be registered; and
4. The Recipient acknowledges that it is registered for GST when it enters into this Agreement and it will notify the Supplier if it ceases to be registered; and

When you sign this GST Declaration, you are taken to have read this Agreement and agreed to the terms and conditions outlined above.

**ABN – related to the horse industry (Applicable for Businesses)**

ABN No:

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Start Date \_\_\_/\_\_\_/\_\_\_ GST Reg.  Yes  No

Should your Hobby/ABN and/or GST registration status change at any time, you must notify us of your new status immediately to enable us to make the correct payments. Should you require clarification on these entity types or taxation rulings, please refer to the ATO website.

**Section D: (must be completed by all)**

**Australian Bank Account Details)**

Account Name: .....																							
Name of Bank .....	Branch.....																						
BSB:	Account Number																						
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Signature .....

Date \_\_\_/\_\_\_/\_\_\_

**RWWA Privacy Policy**

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ABN 21 347 055 603

## Licensing & Registrations Department

14 Hasler Rd Osborne Park 6017

Telephone (08) 9445 5558

Fax (08) 6314 4792

# HOW TO PAY

Phone



Please call the telephone number on your document

Or

Credit Card

Accepted Credit Cards:



Please complete the details below then detach the slip and return it with your completed application

Detach and Return with your application



RACING AND WAGERING WESTERN AUSTRALIA

### CREDIT CARD AUTHORISATION SLIP

Credit Card Type please tick  VISA  MASTERCARD

Card No.									
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					Card Expiry Date /
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Name on Card \_\_\_\_\_

Amount \$ \_\_\_\_\_

Card Holders Signature \_\_\_\_\_

Date \_\_\_\_\_

I agree to RWWA charging my credit card account for the amount shown above

Account No. \_\_\_\_\_

Contact Telephone Number. \_\_\_\_\_

Invoice No/s. \_\_\_\_\_