



RACING AND WAGERING WESTERN AUSTRALIA

RWWA GREYHOUND STEWARDS
14 Hasler Road, Osborne Park WA 6017
Steward's Contacts Ph: 9445 5237 Fax: 9477 5215

Rule 106 Notice of Retirement from Racing

(amended 18/12/2018)

I ... being the [] Last Registered Owner or [] Person Responsible for the Greyhound at the Relevant time
(Please tick whichever applicable)

hereby advise RWWA that ... has been Retired from Racing. EARBRAND: ...
(Greyhounds Racing Name)

MICROCHIP No: ...

Please tick the appropriate box:

[] Retired as Pet - (Provide sterilisation certificate) (Please advise the Name, Address & Contact details of the Person or Agency who is now in control of this greyhound and Attach the Identification Card)

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Person Receiving Greyhound: (Signed) (Dated)

[] Admitted to the RWWA "Greyhounds as Pets" Programme - (Supply Identification Card to GAP)

[] Euthanased by a Veterinary Surgeon - (You must Supply a Veterinary Certificate and Identification Card within 10 days)

Please tick or circle the reason that best describes why you have chosen to Euthanase this greyhound.

- o Not suitable for re-homing or GAP (must supply failed GAP Pre-Assessment Form)
o Due to serious injury / illness

[] Deceased - Due to an injury / illness / accident or similar. (NOTIFY THE STEWARDS IMMEDIATELY) (Provide a full written Statutory Declaration & Attach Identification Card within 10 days)

[] Retired to Stud - For breeding purposes as a Breeding Female (Brood Bitch) / Sire (Stud Dog) (Circle whichever applicable) and will be residing at

under the care and control of the Registered Breeder Mr / Mrs (Person in charge of greyhound & Phone No)

To register a greyhound as a Breeding Female, you will need to apply to RWWA by submitting an Application for Breeding Identification Card (PDF 562KB). This application can be found on RWWA's website under Licensing & Rego / Greyhounds / Ownership & Breeding. Once approved, you will be issued with a pink coloured identification card for that greyhound.

Additional comments:

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I hereby complete this form believing the contents to be truthful and accurate

Signed: Date: License Held:

TO BE COMPLETED BY VETERINARY SURGEON ONLY

CERTIFICATE OF EUTHANASIA:

I, Dr of Vet Clinic

being a registered Veterinary Surgeon with the Veterinary Surgeons Board of Western Australia with my

Registration number being confirm that I have euthanased the greyhound

Identified below on: (Date)

ANIMAL INFORMATION:

Greyhound Racing Name:

Microchip Number:

Ear Brand:

Colour:

Sex: Dog or Bitch (***Please circle***)

Signature of Veterinary Surgeon: Date:

Veterinary Surgeon Comments / Reason for euthanasia:

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