



RACING AND WAGERING WESTERN AUSTRALIA

THOROUGHBRED RACING

DECLARATION OF ACCEPTANCE

FAX TO: 9445 9312

I hereby declare the following acceptor for the meeting to be held at:

VENUE: [] DAY: [] DATE: []

TRAINER: [] ID. NUMBER: []

Table with 6 columns: RACE NAME, DISTANCE, HORSE NAME, IMPORT CODE, AGE, SEX

OFFICE USE ONLY

Table with 4 columns: JOCKEY, RECEIVED BY, TIME, DATE

I hereby agree that the above declaration is received on the condition that the Rules, Regulations, By Laws and Conditions of Racing and Wagering Western Australia shall be binding in all respects

SIGNATURE OF NOMINATOR: []

DATE: []