



RACING AND WAGERING WESTERN AUSTRALIA

WESTSPEED PLATINUM BREEDER AND OWNER NOMINATION FORM

2024/25 Nomination Details for 2022 Foals

NOMINATIONS CLOSE AT 4PM ON THURSDAY, 18 JULY 2024

NOMINATED YEARLING

Sire _____ Dam _____ Sex _____

Based on the yearling's eligibility, please tick () **one fee** below to pay from **either Option A or B or C.**

Option A: Westspeed Breeder Nomination Only

i. WA Sired	\$825 (inc. \$75 GST)	<input type="checkbox"/>
ii. Breed Back	\$825 (inc. \$75 GST)	<input type="checkbox"/>
iii. Interstate Sired	\$1,650 (inc. \$150 GST)	<input type="checkbox"/>

Option B: Westspeed Breeder & Owner Nomination

i. WA Sired	\$3,025 (inc. \$275 GST)	<input type="checkbox"/>
ii. Breed Back	\$3,025 (inc. \$275 GST)	<input type="checkbox"/>
iii. Interstate Sired	\$3,850 (inc. \$350 GST)	<input type="checkbox"/>

Option C: Westspeed Breeder & Owner Nomination & 4YO Extension for Platinum Horses Only (Early Fee)

i. WA Sired	\$4,675 (inc. \$425 GST)	<input type="checkbox"/>
ii. Breed Back	\$4,675 (inc. \$425 GST)	<input type="checkbox"/>
iii. Interstate Sired	\$5,500 (inc. \$500 GST)	<input type="checkbox"/>

If paying **Option A**, please provide details of the Owner so a new form with updated details can be provided.

Owner Name _____ Owner Phone or Email _____

1. BREEDER DETAILS *(you may nominate up to four breeders)*

Name _____ Breeder % _____

Address _____ Postcode _____

Telephone _____ Email _____

2. BREEDER DETAILS *(if applicable)*

Name _____ Breeder % _____

Address _____ Postcode _____

Telephone _____ Email _____

3. BREEDER DETAILS (if applicable)

Name _____ Breeder % _____
Address _____ Postcode _____
Telephone _____ Email _____

4. BREEDER DETAILS (if applicable)

Name _____ Breeder % _____
Address _____ Postcode _____
Telephone _____ Email _____

DECLARATION

I declare that the details above are true and accurate, and the nomination meets the criteria set out in the Westspeed Conditions.

Signature _____ Date ____/____/____

OFFICE USE ONLY

PI No:		Receipt No:		Date:		Amount Paid:	\$
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PAYMENT METHOD

- Credit Card**
Complete below, or phone (08) 9445 5277
- BPAY**
Bill code and reference provided by email on receipt of Nomination Form
- Cheque**
Attach to Nomination Form

Cardholder Name _____

Credit Card (Please tick) VISA MasterCard

Card Number

CVV (3 digit number on reverse of card) Expiry Date ____/____

Amount \$ _____

Signature _____ Date ____/____/____

If payment is made electronically, forms may be submitted by email to racing@rwwa.com.au.