



RACING AND WAGERING WESTERN AUSTRALIA

Licensing & Registrations

14 Hasler Road Osborne Park WA 6017

Telephone (08) 9445 5558

Email: licreginfo@rwwa.com.au

NO FEE

APPLICATION TO REGISTER:

A SYNDICATE NAME



OFFICE USE ONLY
NAME ALLOCATED

WE HEREBY APPLY for permission to use a syndicate name in connection with the registration and racing under the jurisdiction of RWAA of all greyhounds owned or leased by us.

If such application is granted **WE AGREE** to use only the said syndicate name for all purposes of the RWAA Rules of Greyhound Racing in Western Australia. We are aware that permission to use the syndicate name may be cancelled or withdrawn by RWAA at any time without assigning any reason therefore and without notification to us.

THE SYNDICATE NAMES REQUESTED IN ORDER OF PREFERENCE ARE:

1. _____
2. _____
3. _____

NAME OF GREYHOUNDS TO BE INVOLVED WITH SYNDICATE (BLOCK LETTERS): _____

In accordance with Local Rule 122E & 122F the following syndicate members are authorised to act as representatives of the Syndicate.

Must provide not more than **FOUR**, but at least **TWO** names

THE FIRST NAMED AUTHORISED REPRESENTATIVE SHALL BE TAKEN TO BE THE MANAGER OF THE SYNDICATE

AUTHORISED REPRESENTATIVES (BLOCK LETTERS)

REPRESENTATIVE 1: _____
(Manager) *Surname* *Given Names*

Address

Signature

REPRESENTATIVE 2: _____
Surname *Given Names*

REPRESENTATIVE 3: _____
Surname *Given Names*

REPRESENTATIVE 4: _____
Surname *Given Names*

APPLICANTS' NAME AND ADDRESSES

AS A SIGNATORY TO THIS APPLICATION I DECLARE THAT I AM OVER 17- 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 GREYHOUNDS 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 STEWARDS IN WRITING WITH THIS APPLICATION AND AGREE THAT SUCH NOTIFICATION MUST INCLUDE FULL DETAILS OF THE CONDUCT IN QUESTION.




All Members listed on this form, must already be registered as a licenced Owner or Trainer/ Owner. If no registration exists you must apply with your local Controlling Body in the State you reside to be a licenced Owner prior to lodging this form. THE SYNDICATE MANAGER MUST BE THE FIRST PERSON NAMED.

| INDUSTRY LIC. # | MEMBER | SURNAME | GIVEN NAMES | SIGNATURE |
|-----------------|----------------|---------|-------------|-----------|
| | MEMBER (1) | | | |
| | POSTAL ADDRESS | | | EMAIL |
| | MEMBER (2) | | | |
| | POSTAL ADDRESS | | | EMAIL |
| | MEMBER (3) | | | |
| | POSTAL ADDRESS | | | EMAIL |
| | MEMBER (4) | | | |
| | POSTAL ADDRESS | | | EMAIL |
| | MEMBER (5) | | | |
| | POSTAL ADDRESS | | | EMAIL |
| | MEMBER (6) | | | |
| | POSTAL ADDRESS | | | EMAIL |
| | MEMBER (7) | | | |
| | POSTAL ADDRESS | | | EMAIL |
| | MEMBER (8) | | | |
| | POSTAL ADDRESS | | | EMAIL |
| | MEMBER (9) | | | |
| | POSTAL ADDRESS | | | EMAIL |
| | MEMBER (10) | | | |
| | POSTAL ADDRESS | | | EMAIL |

THE ABOVE SIGNATORIES TO THIS APPLICATION HEREBY AUTHORISE THE APPOINTED MANAGER TO EXECUTE REGISTRATION DOCUMENTS ON BEHALF OF THIS SYNDICATE.

GST DECLARATION
Must be completed

FULL NAME

| | | |
|--|---|--|
| Please tick <input checked="" type="checkbox"/> where applicable | | |
| Harness <input type="checkbox"/>  | Thoroughbred <input type="checkbox"/>  | Greyhound <input type="checkbox"/>  |

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. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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

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