

# RWWA Declaration of Euthanasia Form (AWF032)



RACING AND WAGERING WESTERN AUSTRALIA

In accordance with the Rules of Racing LR313 (Thoroughbred) and LR96B (Harness), participants must make reasonable efforts to rehome all healthy and behaviourally sound horses, retiring from racing.

If a horse is euthanised, this form must be completed by the last registered managing owner or person in control of the Nominee Horse and returned to [equinetraceability@rwwa.com.au](mailto:equinetraceability@rwwa.com.au) together with supporting documentation required. The lodgement of this completed form with RWWA is specified as within 7 days of euthanasia.

Participants are reminded of their obligation to notify the relevant national registration body (Racing Australia or Harness Racing Australia) as is required, of the death of a horse.

For any support required to complete this form contact the RWWA Equine Traceability Compliance and Welfare Officer at the above email or on (08) 9445 5369.

Please type or write in **BLOCK CAPITALS**. All details must be completed prior to forms being submitted.

## Name and Contact Details\*

Title:		First Name:		Surname:	
Mobile:		Email:			
Address:					

\*Last registered managing owner or person in control of horse

## Owner Declaration

I hereby confirm I am the managing owner or person in control with authority of the above nominated horse, and all declarations made herein comply with provisions set out in Thoroughbred LR313/ Standardbred LR96B.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Nominee Horse Details

Horse Name: (registered race name) <b>OR</b> Breeding (if racing name not known)	REGISTERED NAME:		
	SIRE:	DAM:	
Microchip Number:			Age:
Date of last race start:	Date of retirement lodgement:		

BRANDS		DESCRIPTION	
Left Side	<input type="text"/>	Right Side	<input type="text"/>
Neck Brand	<input type="text"/>		Sex
			<input type="text"/>
			Colour
			<input type="text"/>

## Last Location of Nominee Horse (include suburb and postcode)

Address:	<input type="text"/>		
Time horse has been at the above location:	Years:	Months:	
If 30 days or less, please provide address of where horse was previously kept:	<input type="text"/>		

## Reason for Nomination for Euthanasia (circle as applicable)

- A. Humane grounds**      Where the horse is seriously ill or injured – **complete Part A**
- B. Medical grounds**      Where a veterinary surgeon has assessed the horse as being unsuitable for rehoming – **complete Part B**
- C. Behavioural grounds**      Where written direct evidence from at least two (2) persons who have direct personal knowledge of the horses' unsuitability for rehoming due to past demonstrated dangerous behaviours is received to the satisfaction of Stewards – **complete Part C**
- D. Rehoming unsuccessful**      following a minimum of two (2) genuine attempts to rehome the horse over a period of not less than 6 weeks following the decision to retire/deregister the horse – **complete Part D**

**ONLY COMPLETE THE SECTION IN THE FOLLOWING PAGES RELEVANT TO YOUR NOMINATION FROM ONE OF THE ABOVE CATEGORIES**

## PART A

**Reason for Nomination for Euthanasia – Humane Grounds** where the horse is seriously ill or injured

1. Provide details regarding incident and injury below
2. Where a veterinarian has been involved in the treatment / euthanasia of the horse, attach a copy of clinical notes from attending veterinarian

Veterinary report attached (where veterinarian has been involved)

Incident and Injury/Illness Details			
Person making declaration			
Method of euthanasia	<input type="checkbox"/> Veterinary	<input type="checkbox"/> Abattoir / Knackery	<input type="checkbox"/> Other Registered Service Provider
Attending veterinarian			
Signature of person making declaration			Date

## PART B

**Reason for Nomination for Euthanasia – Medical Grounds** where a veterinary surgeon has assessed the horse as being unsuitable for rehoming

1. Provide details for medical grounds
  2. Provide copy of veterinary report
- Veterinary report attached (required)

Medical details			
Person making declaration			
Method of euthanasia	<input type="checkbox"/> Veterinary	<input type="checkbox"/> Abattoir / Knackery	<input type="checkbox"/> Other Registered Service Provider
Attending veterinarian			
Signature of person making declaration			Date

## PART C

**Reason for Nomination for Euthanasia – Behavioural Grounds** where written direct evidence is received to the satisfaction of Stewards from at least two (2) persons who have direct personal knowledge of the horses' unsuitability for rehoming due to past demonstrated dangerous behaviours.

Dangerous Behaviour Details		Person 1
Signature		Date

Dangerous Behaviour Details		Person 1
Signature		Date

Person making declaration			
Method of euthanasia	<input type="checkbox"/> Veterinary	<input type="checkbox"/> Abattoir / Knackery	<input type="checkbox"/> Other Registered Service Provider
Signature of person making declaration			Date

## PART D

**Reason for Nomination for Euthanasia – Rehoming has been unsuccessful** following a minimum of two (2) genuine attempts to rehome the horse over a period of not less than 6 weeks following the decision to retire/de-register the horse

### 1. Nominate which of the rehoming avenues were attempted.

- Publicly advertising the horse on no less than two recognised media platforms for same for a period of not less than 6 weeks
- Making application to rehome through a credible rehoming agency (including OTTWA Retraining Program)
- Consigning the horse to a public auction
- Consigning the horse to an industry auction

### 2. Include details in the table below and attach proof.

Rehoming Attempt 1	Date
Documentary proof attached <input type="checkbox"/>	
Signature	

Rehoming Attempt 2	Date
Documentary proof attached <input type="checkbox"/>	
Signature	

Person making declaration			
Method of euthanasia	<input type="checkbox"/> Veterinary	<input type="checkbox"/> Abattoir / Knackery	<input type="checkbox"/> Other Registered Service Provider
Signature of person making declaration			Date