



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 We are aware that permission to use the syndicate name may be cancelled or withdrawn by RWAA at any time without assigning any reason therefore and without notification to us.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.

