



RACING AND WAGERING WESTERN AUSTRALIA

RWWA GREYHOUND STEWARDS
14 Hasler Road, Osborne Park WA 6017
Steward's Contacts Ph: 9445 5237

Notice of Retirement

(Amended 01/02/2022)

I ... being the [ ] Last Registered Owner or [ ] Person Responsible for the Greyhound at the Relevant time
(Please tick whichever applicable)

hereby advise RWWA that ... has been Retired from Racing. EARBRAND: ...
(Greyhounds Racing Name)

MICROCHIP No: ...

Please tick the appropriate box:

[ ] Retired as Pet - (Provide sterilisation certificate and evidence of Prophylactic Dental Treatment) (Please advise the Name, Address & Contact details of the Person or Agency who is now in control of this greyhound and Attach the Identification Card)

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Person Receiving Greyhound: ..... (Signed) ..... (Dated)

[ ] Admitted to the RWWA "Greyhounds as Pets" Programme - (Supply Identification Card to GAP)

[ ] Euthanased by a Veterinary Surgeon - (You must Supply a Veterinary Certificate and Identification Card within 10 days)

Please tick or circle the reason that best describes why you have chosen to Euthanase this greyhound.

- o Not suitable for re-homing or GAP (must supply failed GAP Pre-Assessment Form)
o Due to serious injury / illness

[ ] Deceased - Due to an injury / illness / accident or similar. (NOTIFY THE STEWARDS IMMEDIATELY) (Provide a full written Statutory Declaration & Attach Identification Card within 10 days)

[ ] Retired to Stud - For breeding purposes as a Breeding Female (Brood Bitch) / Sire (Stud Dog) (Circle whichever applicable) and will be residing at ..... (Location Address)
under the care and control of the Registered Breeder Mr / Mrs ..... (Person in charge of greyhound & Phone No)

To register a greyhound as a Breeding Female, you will need to apply to RWWA by submitting an Breeding Identification Card. This application can be found on RWWA's website under Licensing & Rego / Greyhounds / Ownership & Breeding. Once approved, you will be issued with a pink coloured identification card for that greyhound.

Additional comments:

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I hereby complete this form believing the contents to be truthful and accurate

Signed: ..... Date: ..... License Held: .....

# TO BE COMPLETED BY VETERINARY SURGEON ONLY

## CERTIFICATE OF EUTHANASIA:

I, Dr ..... of Vet Clinic .....

being a registered Veterinary Surgeon with the Veterinary Surgeons Board of Western Australia with my

Registration number being ..... confirm that I have euthanased the greyhound

Identified below on: ..... (Date)

### ANIMAL INFORMATION:

Greyhound Racing Name: .....

Microchip Number: .....

Ear Brand: .....

Colour: .....

Sex: Dog or Bitch (***Please circle***)

Signature of Veterinary Surgeon: ..... Date: .....

Veterinary Surgeon Comments / Reason for euthanasia:

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