



Application Form

Authority to Catch Greyhounds

APPLICANTS MUST BE 14 YEARS OF AGE OR OLDER

APPLICANTS AGED 18 YEARS OR OLDER, MUST PROVIDE A CURRENT POLICE CLEARANCE

APPLICANT'S NAME:	
Mr/Mrs/Ms/Miss _____	_____
(FULL CHRISTIAN NAMES)	(SURNAME)
of _____	_____
(ADDRESS IN FULL - BLOCK LETTERS)	
_____	Postcode _____
Applicant's DOB _____	Telephone _____

Wish to apply for permission to catch greyhounds pursuant to the provisions of GAR 82.

I acknowledge that this Authority is subject to the following conditions:-

- a) That I hereby agree to be bound by and comply with all such Rules and Statutory provisions in respect of greyhound racing as shall for the time being and from time to time be in force and that the Authority to catch may be revoked by the RWAA Stewards at any time.
- b) That I will comply with any directions, which may be given by RWAA or the Stewards.

QUESTIONNAIRE

(Please answer YES/NO. Dashes or other marks will not be accepted)

1. Have you previously had experience in handling greyhounds at:
 - (a) Race Meetings?
 - (b) Qualifying Trials?
 - (c) Trials conducted at a registered Track?

Application recommended by Owner or Trainer:

NAME:
(BLOCK LETTERS))

Signature of Owner or Trainer

Signature of Applicant

Dated/...../.....

(If applicant is under 16 years of age)
Application recommended by Parent/Guardian.

NAME:
(BLOCK LETTERS)

of
(ADDRESS IN FULL - BLOCK LETTERS)

Signature

Dated/...../.....