

APPLICATION TO TRANSFER OWNERSHIP OF A GREYHOUND



This application together with the prescribed fee must be lodged with Greyhound Welfare and Integrity Commission within 10 working days of the transfer taking place and prior to a nomination being lodged.

Greyhound details

Name (if named)

Colour

Sex

Microchip number

Ear brand

Sire

Dam

Is the greyhound subject to any current disqualification or suspension?

Yes

No

Has the greyhound been subject to any disqualifications or suspensions in the past?

Yes

No

Details of disqualifications and/or suspensions

Current owner details (seller)

Individual Owner ID Number

Syndicate ID Number

Partnership ID Number

Where a greyhound is owned by a syndicate or partnership, the following section should be completed by the Manager of the syndicate or partnership.

Full name

Date of birth

 / /

Current address

State

Postcode

Phone number

Mobile number

Email address

Greyhound name

Microchip number

Earbrand



Declaration and authorisation

I declare that all information I have provided in this application is:

- (a) complete in all material respects; and
- (b) true and correct to the best of my knowledge.

I understand, acknowledge and agree that:

- in processing this application, if the Commission determines that information I have provided with my application is found to be incomplete or incorrect, it may result in my application being refused;
- if my application is approved, and the Commission later determines that information I have provided with my application is incomplete or incorrect, it may result in disciplinary action being taken against me, up to and including cancellation of my registration;
- the Commission may check any details of the information I have supplied in this application and I consent to the Commission collecting, using and disclosing my personal information, and any other information contained within this application, including disclosing the information I have supplied to any third party, where such disclosure is necessary to process my application;
- I will immediately advise the Commission if there is any change to the particulars or information I have supplied in this application;
- if I am registered by the Commission, I will comply with the provisions of the Greyhound Racing Act 2017 and any subordinate legislation, including the greyhound racing rules, at all times.

By agreeing to this declaration you consent to the Greyhound Welfare & Integrity Commission collecting, using, holding and disclosing personal information about you in compliance with the Commission’s Privacy Statement, a copy of which can be found at www.gwic.nsw.gov.au.

Full name of current owner (seller)

Signature of current owner (seller)

Date

 / /

Partnerships: all partners must print their names and sign

(If more than four partners, please attached additional list)

Name	Signature	ID	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value=""/> / <input type="text" value=""/> / <input type="text" value=""/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text" value=""/> / <input type="text" value=""/> / <input type="text" value=""/>
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Greyhound name

Microchip number

Earbrand



New owner details (buyer)

Individual Owner ID Number

Syndicate ID Number

Partnership ID Number

Where a greyhound is owned by a syndicate or partnership, this section should be completed by the Manager of the syndicate or partnership.

Full name

Date of birth

/ /

Current address

State

Postcode

Phone number

Mobile number

Email address

Declaration and authorisation

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Full name of new owner (buyer)

Signature of new owner (buyer)

Date

/ /

Greyhound name

Microchip number

Earbrand



Partnerships: all partners must print their names and sign

(If more than four partners, please attached additional list)

Name	Signature	ID	Date
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>
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<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> / <input type="text"/> / <input type="text"/>

Location

Name of custodian and kennel address of where greyhound will be located

Named greyhound:

If you are a registered Owner trainer or Public trainer, do you intend to train this greyhound? Yes No

Payment details - for a named greyhound only

Payment options Cheque Money order

Credit card payment details (please tick) Visa MasterCard

Credit card no.

Expiry date / Amount

Name on card (please print)

Signature

Please submit this completed form to GWIC:

- By email to registration@gwic.nsw.gov.au (applications lodged by email must be paid by credit card)
- By post addressed to: GWIC, PO Box 718, Bathurst NSW 2795
- In person at: Greyhound Welfare & Integrity Commission, Level 1, 230 Howick Street, Bathurst NSW 2795

If assistance is required with your application, please contact GWIC Customer Service team on 1800 951 755 or email registration@gwic.nsw.gov.au.