

GREYHOUND HEALTH AND FITNESS CERTIFICATE

RETURN TO RACE AFTER SIX MONTHS



LR21B: Any greyhound which has not competed in an event for a period in excess of 6 months, will be ineligible to be nominated for any event until it passes an approved veterinary examination and completes a satisfactory trial in the presence of an official of the Controlling Body. The provisions of GAR72 shall not apply to this rule.

This form must be completed by:

- the greyhound's **owner or trainer only** (Parts 1 and 5),
- a **veterinarian** who has examined the greyhound (Parts 2 and 3), and
- an **on track steward** who has witnessed the greyhound's performance in a trial (Part 4).

Once complete, the owner or trainer of the greyhound must lodge this form with Greyhound Welfare and Integrity Commission (GWIC).

(NOTE: If you hold a breeding lease for a greyhound but are not that greyhound's trainer, you are not eligible to return the greyhound to race and may not complete this form).

Part 1. Greyhound details (to be completed by owner or trainer)

Greyhound's name

Microchip no.

Sex

 Male Female

Ear brand

Colour

Part 2. General physical examination (to be completed by veterinarian)

General health status	Good	Moderate	Poor	Comments
a) Physical body condition	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
b) Teeth and gums	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
c) Temperament	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
d) Heart rate Bpm & rhythm	<input type="text"/>			Respiratory rate Bpm & rhythm <input type="text"/>

General health status	Normal	Abnormal	Comments
e) Head and eyes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Pannus			
<input type="checkbox"/> Yes <input type="checkbox"/> No			
f) Limbs / toes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	
	<input type="checkbox"/>	<input type="checkbox"/>	

g) Heart auscultation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
h) Mucous membrane and capillary refill time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
i) Abdominal palpation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
j) Feet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
k) Gait and soundness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
l) Skin	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
m) Tail	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

Last whelping date (if applicable) **No. of litters whelped**

/ /

For the purposes of this health and fitness certificate the veterinarian examining the greyhound is not required to conduct clinical pathology, internal investigations or ultrasounds to determine general greyhound health. However, if the examining veterinarian is unable to attest that the greyhound is fit and healthy without further examinations, the owner or trainer and vet may elect to undertake these further examinations. Where further investigations have taken place then the results of these investigations should be attached to and lodged with this form.

General comments or any additional remarks (e.g. reproductive conformation)

Part 3. Examination declaration (to be completed by veterinarian)

Name of veterinarian	<input type="text"/>	Registration no.	<input type="text"/>
Name of veterinary clinic	<input type="text"/>	Date of examination	<input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

Declaration

I, being a registered veterinarian, confirm that I have examined the above named greyhound, and can find no reason, based upon this clinical examination and available history, why this greyhound should not be considered fit and healthy to race at this time.

Signature	<input type="text"/>	Date	<input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
------------------	----------------------	-------------	---



Declaration and authorisation

I declare that all information I have provided in this application is true and correct. I understand disciplinary action may be taken against me and/or proceedings under the *Crimes Act 1900* if I provide information to the GWIC that is false, misleading or incomplete. I authorise GWIC to check any details of the information given in this application and I consent to GWIC disclosing this information to a third party according to law. I will advise GWIC if there is any change to the particulars in this form.

Privacy

By signing this document you consent to the Greyhound Welfare & Integrity Commission collecting, using, holding and disclosing personal information about you. You can find out more about viewing our privacy policy at gwic.nsw.gov.au.

Part 5. Details and signature of person lodging form (to be completed by owner or trainer)

Name

OzChase ID no.

Phone contact

Email address

Declaration

I declare that I am the registered owner and/or the licensed trainer of the above named greyhound.

Owner or trainer signature

Date

--	--	--	--	--	--	--	--	--	--

Please note, if a GWIC vet is to be used, bookings MUST be made at least 2 working days prior and presented at track 30 minutes before kenneling. This is a long examination and time should be programmed accordingly.

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 2975
- In person at: Greyhound Welfare and 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.

If assistance is required with your application, please contact GWIC Customer Service team:

- by phone on 1800 951 755
- by email at registration@gwic.nsw.gov.au