

ASSOCIATE RACE OFFICIAL APPLICATION FORM



Your application must include:

Colour passport styled photograph

Checklist

Any missing documents can delay the processing of your application. This form is to be completed if you are under 18 years of age and wish to hold an Associate Kennel and Track Attendant and/or Associate Starter registration.

Clause 12(2)(a) of the Greyhound Racing Regulation 2019 provides authority for the Commission to ask you for information necessary to determine whether to grant or refuse your application.

Which type of registration are applying for? (select one or more)

- Associate Kennel and Track Attendant** - aged 14 years to 15 years
- Associate Kennel and Track Attendant** - aged 16 years to 17 years
- Associate Starter** - aged 16 years to 17 years

Personal details

Mr Mrs Miss Ms Other

First name

Middle name

Surname

Date of birth

 / /

GWIC Registration Number (if already registered)

Telephone number/s

Home

Mobile

Daytime

Email address

Preferred contact method

Email SMS Mobile Home Post

Receive SMS alerts?

Yes No



Residential address

Address

Suburb

State

Postcode

Postal address (if different to residential address)

Address

Suburb

State

Postcode

Supervising Participant Declaration

The person who will be supervising and taking responsibility for you at a track must complete this declaration. The person must hold the same registration as you are applying for.

If you are applying for multiple roles and/or being supervised by more than one person, please include a completed declaration for each additional person.

I declare that this applicant will be under my full and direct supervision when they are performing this role and I assume all responsibility for their actions while under my supervision. I undertake to accompany the applicant at all times when in a restricted area of a licensed racetrack, and/or handling and caring for registered greyhounds on a licensed racetrack.

First name

Surname

GWIC Registration Number

Signature

Date of birth

 / /

Declaration and authorisation

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

- Complete in all material respects; and
- True and correct to the best of my knowledge.

I understand, acknowledge and agree that:

- I consent to the Commission collecting, using and disclosing my personal information, and any other information I provided to the Commission, including to any third party, where such disclosure is necessary to process an application or notification. This includes, but is not limited to, my consent for the Commission to obtain a National Police History Check on my behalf;
- In processing my application for registration, the Commission may require additional information from me that is, in the Commission's opinion, necessary to determine whether to register or refuse to register me as a greyhound racing industry participant. If after 21 days of being requested to provide any additional information I fail to provide the information, the Commission may refuse to register me as a greyhound racing industry participant;
- If the Commission later determines that any information I have provided is, incorrect or deliberately false, disciplinary action may be taken against me, which could include suspension or disqualification of my registration or a warning off;
- I will immediately advise the Commission if there is any change to the information I have provided in any application or notification;
- While I am a greyhound racing industry participant, I will comply at all times with the provisions of the Greyhound Racing Act 2017, Greyhound Racing Regulation 2019, Greyhound Racing Rules, Code of Practice and the Commission's policies.

Privacy

By signing this form, 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 gwic.nsw.gov.au.



Signature of applicant

Date

 / /

Parent / Guardian Consent

I give consent for my child to apply for this role and support their application.

First name

Surname

Signature

Date of birth

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Please submit this completed form to GWIC:

- **Email** - registration@gwic.nsw.gov.au
- **Post** - PO Box 718, Bathurst NSW 2795
- **In person** - Level 1, 230 Howick Street, Bathurst NSW 2795

If assistance is required with your application, please contact our Registration and Welfare Team on 13 49 42 or email registration@gwic.nsw.gov.au.