Registration of a Greyhound Trainer – Public Trainer Application

Use this form to apply for registration of a greyhound public trainer in accordance with Section 18 of the Rules of Greyhound Racing.

See the greyhound racing webpage for further information on applicant requirements.

Applicant details							
Surname				Date of	birth:		
Given name/s							
Residential address				State		Postcode	
Postal Address				State		Postcode	
Phone Number			Mobile	number			
Email Address							
Licence details							
Have you held a non-publi	c trainer licence for not les	s than 1	l8 month	S		Yes □ N	lo □
Have you previously been If yes, state all the followin	•	or overs	eas racin	g control	body?	Yes □ N	No 🗆
Licence type:							
Racing authority name:							
Number of years registered:							
Period of registration:							
Racing Industry experience	e						
Please identify any racing industry experience that you have and include effective dates.		Details:					
Please outline any experience you have with greyhounds.			Details:				
Disclosures							
Have you ever had a licence disqualified, revoked, suspended, withdrawn, conditions imposed or a licence application refused by any racing authority?		Yes □ No □ Details:					
If yes, please provide all lic	ence details						
Do you understand that if you are charged with an offence under Australian Law that you must notify the Northern Territory Racing and Wagering Commission within 14 days?		Yes By ticking yes, you acknowledge your understanding of this requirement.					



Do you have any current or prior criminal convictions or charges (including guilty pleas without conviction) in Australia or overseas? If so, please outline the circumstances surrounding your charges or convictions (attach additional information if insufficient space)			Deta	□ No □ ils				
Have you ever been chrelating to cruelty to a	_	y offence	Yes [□ No □				
If yes, please outline the the outcome of the ma		e charge and	d					
Do you have a greyhou	und retirement	plan?	Deta	Yes □ No □ Details: Refer to supporting documents checklist				
Kennel Specifications								
Kennel address					State		Postcode	
Number of Kennels				•				
Construction type								
Kennel height (m)		Width (m)			Length	(m)		
Provide a diagram of kennel configuration (aerial view) tindividual kennels. Refer to supporting documents checklis				ne applicat	ion – inc	uding dim	ensions of	
At the date of this application, do you have any rac name as an owner, trainer, syndicate or lease for which If yes, list all racing greyhounds registered in your name		which Ow	ners regist	_	-	Yes □ N	√ 0 □	
Name of greyhound	Microchip/Ea	crochip/Ear brand Address where kennelled			Trainer			
Other animal declarati	on							
Do any other animals, other than registered racing gr property as the kennelling address?		ng greyhou	nds, reside	on the s	ame	Yes □ N	√ 0 □	
Domestic Animals - at	tach additiona	l informatio	n if insuffic	ient space	!			
Animal type Identification (i.e. microchip)			•		t informat I is kept in	ion relation to t	:he	



Farming, Agric	ultural or	Rural animals – attach additi	ional ir	formatio	on if insufficient	space	
Animal type (i.e. sheep, cat horse)	tle,	Purpose of animal (i.e. Dairy, wool)	Any other relevant information (Where the animal is kept in relation to the kennels)				
Financials							
racing greyhou	ınds in yo	financial means to ensure the our care? Please provide Bank	_	_	re of all registere	ed	Yes □ No □
		ments checklist					
Are you currer	ntly emplo	oyed? If yes, state the following	ng:				Yes □ No □
Occupation							
Employment S	tatus						
Employer nam	е						
Employer addı	ess	State Postcode					code
Employer pho	ne						
Do you have a If yes, provide	-	sources of income? Is below	Yes [Deta	□ No □ ils:			
Applicant decl	aration						
	nmission (litions:	on for registration as a public Commision) and I acknowleds					
a) to abio registr any de	le by any ation of g cision or	statutory legislation and rules reyhounds, and greyhound ra direction made by the Commi ction on behalf of the Commis	acing ir ission,	general or anoth	and, further, tha	at you	will comply with
Autho	rity shall a	s other than persons registere at any time during the currenc ny care; and					~
		I and agree to the objectives o	of the	(Commis	sion) <u>fit and pro</u>	per tes	t policy (policy);
d) That I							

such greyhounds shall be properly muzzled and on a leash; and

one person shall not exercise more than four greyhounds at any one time; and

no greyhound shall be exercised in any public park without the consent of the authority



i.

ii.

iii.

in control of that park; and

- e) At the date of this application, the greyhounds mentioned below are registered in my name as owner or lessee for which owner's registration certificates are required; and
- f) All statements and information contained in this application are true and correct to the best of my knowledge by virtue of the *Oaths*, *Affidavits and Declarations Act* 2010; and
- g) I have read and understood the information contained in this application and associated guidelines; and

I know that it is an offence to make a declaration that is false in any material particular.

Declared at: (location)	On: (date)	
Applicant signature:	Date	

Note: Under the *Oaths*, *Affidavits and Declarations Act 2010* a person wilfully making a false statement or altering a statement, in a statutory declaration is guilty of a crime and is liable to a penalty or imprisonment, or both.

Supporting documents checklist				
Completed and passed public trainer written test				
Provide Criminal history check (Police name check)				
Provide current un-redacted bank statements (minimum 3 months)				
Provide a diagram of kennel configuration (aerial view)				
Provide appropriate greyhound retirement plan				
Prescribed application fee attached.				
Complete and signed declaration.				

Privacy statement

The Department of Industry, Tourism and Trade respects and is committed to safeguarding the confidentiality and privacy of the information that it collects and handles, in accordance with the <u>Northern Territory</u> <u>Information Act 2002</u>.

You have been asked to provide personal information as part of your application. You do not have to provide your personal information but if you choose not to, the NT Racing and Wagering Commission may be unable to accept or process your request.

We may share your information:

- If required or authorised by law to do so
- If you have given us your consent to share your personal information for a specific purpose.

Find out more about how we handle your personal information by reading the Departments privacy policy

Lodgement						
Complete applications can be lodged in person, email or via post at a Territory Business Centre below:						
Darwin:	Darwin Corporate Park, Ground Floor, Building 3, 631 Stuart Highway Berrimah					
Katherine:	Big Rivers Government Centre, 5 First Street, Katherine					
Tennant Creek:	Shop 2, Barkly House, Cnr Davidson and Paterson Streets, Tennant Creek					
Alice Springs:	Ground Floor, The Green Well Building, 50 Bath Street Alice Springs					
1800 193 111	territorybusinesscentre@nt.gov.au GPO Box 9800 Darwin NT 0801					



Payment details

A fee is payable on lodgement of this application form. Payment can be made by:

- Cash (in person only); or
- Cheque (made out to Receiver of Territory Monies); or
- Credit card (Visa or MasterCard accepted in person or over the phone). Note: A staff member from the Territory Business Centre will contact you via phone for payment.

Payment date:		Receipt number:		Amount paid:	
---------------	--	-----------------	--	--------------	--

