

| HORSE OWNERSHIP | |
|-----------------|---|
| 24. | Are you an Owner, Part-Owner, Lessee or Part-Lessee of any horse under the provisions of the New Zealand Rules of Racing? If "Yes", provide details of horses. |

| LICENSE HISTORY | |
|-----------------|---|
| 25. | Have you previously held any licence in New Zealand or any overseas racing jurisdiction (including Harness and Greyhound control bodies)? "Yes" or "No". If "Yes", provide full details. |
| 26. | Have you ever had a licence disqualified, revoked, suspended, withdrawn or refused by any Racing Authority? "Yes" or "No". If "Yes", provide full details. |

| CRIMINAL HISTORY | |
|------------------|--|
| 27. | Have you ever been convicted in a District or other Court of any offence against the statutory laws of New Zealand or any other country? "Yes" or "No". If "Yes", provide full details. |
| 28. | Have you ever been charged with any offence relating to cruelty to animals? "Yes" or "No". If "Yes", provide full details. |

| FINANCIAL ISSUES | |
|------------------|---|
| 29. | Have you ever been declared Bankrupt? "Yes" or "No". If "Yes", provide full details. |
| 30. | Have you made arrangements with an adviser in relation to the preparation of your financial accounts? |
| 31. | Do you lodge tax returns on an annual basis? |
| 32. | Have you lodged your tax return for the previous financial year? If "No", provide reasons why. |

| CONTACT PERSON (in case of emergency) | |
|---------------------------------------|---------------------|
| 33. | Name |
| 34. | Relationship to you |
| 35. | Best contact number |

| PAYMENT DETAILS | |
|--|--|
| I would like to pay by Bank Deposit: <input type="checkbox"/> Date Deposited: _____ | |
| New Zealand Thoroughbred Racing Inc - Bank Account Number 01-0517-0063944-00. (Please use your name & form type as reference) | |
| Please charge my: Mastercard <input type="checkbox"/> Visa <input type="checkbox"/> Amex <input type="checkbox"/> Diners Club <input type="checkbox"/> | |
| Card No: <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"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | Expiry Date: <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> |
| Cardholder's Name: _____ | Signature: _____ |
| My Cheque is enclosed for \$ _____ (Payable to New Zealand Thoroughbred Racing) | |

DECLARATION BY APPLICANT

I do hereby declare that:

1. By signing and submitting this form to New Zealand Thoroughbred Racing Inc (NZTR) I have read the form and all of the information that I have provided to NZTR in this application form is true and correct in every particular.
2. I understand that NZTR will rely upon the information I have provided in this application form for the purpose of determining whether I am an appropriate person to receive a Class A rider's licence.
3. I understand that NZTR may take disciplinary action against me in the event that the information I have provided in this application form is false or misleading in any particular, and that disciplinary action may include revocation of any licence issued to me.
4. I acknowledge that the provision of any false, misleading or inaccurate information on this form may result in me being prosecuted under the NZTR Rules of Racing or otherwise. I confirm with the requirements listed therein and that I:
 - (a) have attained the age of 18 years and have completed an apprenticeship in accordance with NZTR's requirements;
 - (b) either:
 - i. have previously held a Class B rider's licence;
 - ii. have previously held a Class A rider's licence; or
 - iii. am competent to ride in Races, trials (including jump-outs and tests for certification purposes) and trackwork; and
 - (c) am financially sound and of good character.
5. I have obtained a copy and informed myself of the NZTR Rules of Racing and it is my obligation as a holder of a Class A rider's licence to update myself in relation to NZTR's policies and any rule changes and to abide by those policies and Rules of Racing.
6. In accordance with Rule 656 of the NZTR Rules of Racing, I consent to providing a sample of my blood, breath, urine, saliva or sweat (or more than one thereof), as and when required by a Stipendiary Steward or Investigator, for the purposes of drug and alcohol testing.
7. I am not currently subject to any disciplinary action initiated by any other Racing Authority in New Zealand or overseas and I will immediately inform NZTR should any other Racing Authority in New Zealand or overseas initiate disciplinary action against me.
8. I understand that if I do not pay any amount owed to NZTR within the required time, NZTR may set-off this debt against any prizemoney due and owing to me through the TROSA system administered by NZTR.
9. I authorise NZTR to make deposits via Electronic Funds Transfer into the bank account nominated by me in this application form. I understand that if my bank account details change, I am required to notify NZTR in writing of the new bank account details and that until I notify NZTR in writing of the change, NZTR may still make deposits into the account nominated in this form.
10. For GST purposes relating to the supply of services by me (the Supplier), to NZTR (the Recipient):
 - (a) I (the Supplier) acknowledge that if I am registered for GST purposes, I will notify NZTR in writing if I cease to be registered for GST purposes in the future, and if I am not currently registered for GST purposes, I will notify NZTR in writing if I become registered for GST purposes in the future;
 - (b) I (the Supplier) will not issue tax invoices in relation to any prizemoney (supplies) that NZTR may have to pay me;
 - (c) NZTR (the Recipient) can issue tax invoices in respect of prizemoney (supplies) that it has to pay me;
 - (d) I (the Supplier) will not issue tax invoices in respect of the supplies;
 - (e) I understand that NZTR is registered for GST purposes and that it will notify me in writing if it ceases to be GST registered or it is otherwise unable to prepare Buyer Created Tax Invoices (BCTI) on my behalf;
 - (f) I understand that NZTR can only issue a BCTI on my behalf if it complies with the requirements established under legislation.
11. I authorise NZTR to disclose information provided by me in this application form to:
 - (a) All Racing Authorities in New Zealand and overseas;
 - (b) The persons specified in this application form;
 - (c) Government Departments and regulatory authorities;
 - (d) Persons currently unknown, for the purpose of complying with statutory obligations requiring NZTR to disclose information.
12. I consent to NZTR contacting all Authorised Wagering Operators in New Zealand and overseas for the purpose of determining whether I am betting in contravention to the Rules of Racing. I also consent to those third parties disclosing information to NZTR about any betting I engage in.
13. I consent to NZTR contacting other Racing Authorities in New Zealand and overseas and I consent to those bodies disclosing any information that may be requested at any time by NZTR.
14. I hereby consent to the New Zealand Police disclosing to NZTR any information that they may have pursuant to this application. I understand that any record of criminal convictions I might have will be automatically concealed if I meet the eligibility criteria stipulated in Section 7 of the Criminal Records (Clean Slate) Act 2004.
15. I have attached a recent passport sized photograph of myself (if not previously supplied within the last 12 months).
16. I undertake to provide to NZTR a medical certificate from a registered Medical Practitioner to support my application for annual renewal of my Class A rider's licence.
17. I authorise NZTR to use the information collected from me for any purpose which, in accordance with its privacy policy, it may in its discretion think appropriate.

Full Name of Applicant

Full Name of Witness

Signature of Applicant

Signature of Witness

Date

Date

PRIVACY ACT 1993

This information is being collected and will be held by New Zealand Thoroughbred Racing (NZTR) at PO Box 38-386, Wellington Mail Centre. It is being collected for the purpose of processing the matter the subject of this form. You agree that the personal information supplied by you may be retained by NZTR and disclosed to and retained by third parties for the purpose of processing relevant forms, direct marketing or providing you with information on events, products and services. NZTR will not use or disclose your personal information in any way, other than that disclosed in this policy or with your prior consent. If you do not provide the requested information then NZTR may not be able to process the matters the subject of this form. That may result in a breach of the Rules of Racing. You may access your personal information (if it is readily retrievable) at the above address and you may request NZTR to update or correct that information. You may also request to be removed from the NZTR database for the purpose of direct marketing and providing you with information on events, products and services by notifying NZTR by email or by letter to the above address. If you do **not** wish your information to be retained in our database, or disclosed and retained by third parties for the purpose of providing you with information on events, products and services, then please tick the box below.



OFFICE USE ONLY:

Application APPROVED / DECLINED by New Zealand Thoroughbred Racing.

ID Number:

.....
Signature

.....
Title

.....
Date

 Photo Payment Clearance (if req.) Investigator (if req.) S/Steward (if req.)