



GREYHOUNDS QUEENSLAND LIMITED

Albion Park Raceway, Breakfast Creek 4010
 PO Box 250, Albion 4010 Phone 3262 7800 Fax 3262 7809

APPLICATION – SYNDICATE REGISTRATION
ALL DETAILS TO BE COMPLETED IN BLACK INK AND BLOCK LETTERS

Syndicate Name:.....

I/we hereby make application to Greyhounds Queensland Limited to be registered as a Syndicate and in consideration of such application being granted, I/we agree to be bound by and comply with –

1. The rules of greyhound racing of Greyhounds Queensland Limited.
2. All decisions and directions of GQL which it is empowered to make or give: and
3. GQL reserves the right to request the applicant to provide a National Police Certificate.
4. Greyhound accommodations shall be open to inspection by authorised officers of GQL or Stewards at any time.
5. That GQL may (without being in any way bound to do so) at any time and from time to time treat..... (who has signed this application by way of confirmation) for the purposes of the above mentioned Rules and decisions (or any part of them) as the sole owner and/or as the sole representative of the SYNDICATE in relation to any greyhound in respect of which the SYNDICATE may be the nominator or have a proprietary interest whether as owner, lessee or otherwise, or have or exercise a right of control or disposition.
6. That each of us hereby appoints the person nominated in Clause 5 as our agent for the purposes of:
 - a. exercising any power;
 - b. making any decision; or
 - c. taking any action
 on behalf of the Syndicate or its members.
7. That such appointment may only be revoked upon the furnishing of a written request signed by each member of the Syndicate to GQL.
8. That subject to the terms of this application, we absolve GQL from any responsibility and/or claim for ownership which may arise, and any dispute or claim for prize money or progeny or other monetary earnings as a result of the appointed agent.
 - a. exercising any power;
 - b. making any decision; or
 - c. taking any action.
 on behalf of the Syndicate or its members.

I hereby confirm my nomination under Clauses 5/6.

I declare that the information tended in this application is correct and accurate.

Date: Signed.....
 (To be signed by the person named in Clause 5/6)

Has any Syndicate member ever been disqualified, suspended, warned off, fined or listed as defaulter in connection with any code of racing, or in the past 5 years been convicted of a criminal offence punishable by fine or imprisonment? YES / NO

If yes, the member must provide full details. The information may be provided “in confidence” directly to Greyhounds Queensland Limited.

EACH SYNDICATE MEMBER MUST RECORD THEIR DETAILS ON FORM/S ATTACHED

	REGISTRATION NO:	CERTIFICATE POSTED:	DATE RECEIVED:
OFFICE USE ONLY			

Syndicate Name: _____

Syndicate members must strike a line through Clause 6 on page one (1) if they do not wish to appoint the Manager as an agent to act on their behalf.

Member 1 (Manager) - Surname: (Mr./Mrs./Ms./Miss) _____

Christian Names: _____ Preferred name: _____

Address: _____ Post Code: _____

Postal Address: _____ Post Code: _____

Date of Birth: _____ Email address: _____

Home Phone: _____ Mobile No: _____

Greyhound Racing Club nearest your residence: _____

Signature: _____ Date: _____

Member 2 - Surname: (Mr./Mrs./Ms./Miss) _____

Christian Names: _____ Preferred name: _____

Address: _____ Post Code: _____

Postal Address: _____ Post Code: _____

Date of Birth: _____ Email address: _____

Home Phone: _____ Mobile No: _____

Greyhound Racing Club nearest your residence: _____

Signature: _____ Date: _____

Member 3 - Surname: (Mr./Mrs./Ms./Miss) _____

Christian Names: _____ Preferred name: _____

Address: _____ Post Code: _____

Postal Address: _____ Post Code: _____

Date of Birth: _____ Email address: _____

Home Phone: _____ Mobile No: _____

Greyhound Racing Club nearest your residence: _____

Signature: _____ Date: _____

Member 4 – Surname: (Mr./Mrs./Ms./Miss) _____

Christian Names: _____ Preferred name: _____

Address: _____ Post Code: _____

Postal Address: _____ Post Code: _____

Date of Birth: _____ Email address: _____

Home Phone: _____ Mobile No: _____

Greyhound Racing Club nearest your residence: _____

Signature: _____ Date: _____

Syndicate Name: _____

Syndicate members must strike a line through Clause 6 on page one (1) if they do not wish to appoint the Manager as an agent to act on their behalf.

Member 5 - Surname: (Mr./Mrs./Ms./Miss) _____

Christian Names: _____ Preferred name: _____

Address: _____ Post Code: _____

Postal Address: _____ Post Code: _____

Date of Birth: _____ Email address: _____

Home Phone: _____ Mobile No: _____

Greyhound Racing Club nearest your residence: _____

Signature: _____ Date: _____

Member 6 - Surname: (Mr./Mrs./Ms./Miss) _____

Christian Names: _____ Preferred name: _____

Address: _____ Post Code: _____

Postal Address: _____ Post Code: _____

Date of Birth: _____ Email address: _____

Home Phone: _____ Mobile No: _____

Greyhound Racing Club nearest your residence: _____

Signature: _____ Date: _____

Member 7 - Surname: (Mr./Mrs./Ms./Miss) _____

Christian Names: _____ Preferred name: _____

Address: _____ Post Code: _____

Postal Address: _____ Post Code: _____

Date of Birth: _____ Email address: _____

Home Phone: _____ Mobile No: _____

Greyhound Racing Club nearest your residence: _____

Signature: _____ Date: _____

Member 8 – Surname: (Mr./Mrs./Ms./Miss) _____

Christian Names: _____ Preferred name: _____

Address: _____ Post Code: _____

Postal Address: _____ Post Code: _____

Date of Birth: _____ Email address: _____

Home Phone: _____ Mobile No: _____

Greyhound Racing Club nearest your residence: _____

Signature: _____ Date: _____

Syndicate Name: _____

Syndicate members must strike a line through Clause 6 on page one (1) if they do not wish to appoint the Manager as an agent to act on their behalf.

Member 9 - Surname: (Mr./Mrs./Ms./Miss) _____

Christian Names: _____ Preferred name: _____

Address: _____ Post Code: _____

Postal Address: _____ Post Code: _____

Date of Birth: _____ Email address: _____

Home Phone: _____ Mobile No: _____

Greyhound Racing Club nearest your residence: _____

Signature: _____ Date: _____

Member 10 - Surname: (Mr./Mrs./Ms./Miss) _____

Christian Names: _____ Preferred name: _____

Address: _____ Post Code: _____

Postal Address: _____ Post Code: _____

Date of Birth: _____ Email address: _____

Home Phone: _____ Mobile No: _____

Greyhound Racing Club nearest your residence: _____

Signature: _____ Date: _____

Member 11 - Surname: (Mr./Mrs./Ms./Miss) _____

Christian Names: _____ Preferred name: _____

Address: _____ Post Code: _____

Postal Address: _____ Post Code: _____

Date of Birth: _____ Email address: _____

Home Phone: _____ Mobile No: _____

Greyhound Racing Club nearest your residence: _____

Signature: _____ Date: _____

Member 12 – Surname: (Mr./Mrs./Ms./Miss) _____

Christian Names: _____ Preferred name: _____

Address: _____ Post Code: _____

Postal Address: _____ Post Code: _____

Date of Birth: _____ Email address: _____

Home Phone: _____ Mobile No: _____

Greyhound Racing Club nearest your residence: _____

Signature: _____ Date: _____

Syndicate Name: _____

Syndicate members must strike a line through Clause 6 on page one (1) if they do not wish to appoint the Manager as an agent to act on their behalf.

Member 13 - Surname: (Mr./Mrs./Ms./Miss) _____

Christian Names: _____ Preferred name: _____

Address: _____ Post Code: _____

Postal Address: _____ Post Code: _____

Date of Birth: _____ Email address: _____

Home Phone: _____ Mobile No: _____

Greyhound Racing Club nearest your residence: _____

Signature: _____ Date: _____

Member 14 - Surname: (Mr./Mrs./Ms./Miss) _____

Christian Names: _____ Preferred name: _____

Address: _____ Post Code: _____

Postal Address: _____ Post Code: _____

Date of Birth: _____ Email address: _____

Home Phone: _____ Mobile No: _____

Greyhound Racing Club nearest your residence: _____

Signature: _____ Date: _____

Member 15 - Surname: (Mr./Mrs./Ms./Miss) _____

Christian Names: _____ Preferred name: _____

Address: _____ Post Code: _____

Postal Address: _____ Post Code: _____

Date of Birth: _____ Email address: _____

Home Phone: _____ Mobile No: _____

Greyhound Racing Club nearest your residence: _____

Signature: _____ Date: _____

Member 16 – Surname: (Mr./Mrs./Ms./Miss) _____

Christian Names: _____ Preferred name: _____

Address: _____ Post Code: _____

Postal Address: _____ Post Code: _____

Date of Birth: _____ Email address: _____

Home Phone: _____ Mobile No: _____

Greyhound Racing Club nearest your residence: _____

Signature: _____ Date: _____

Syndicate Name: _____

Syndicate members must strike a line through Clause 6 on page one (1) if they do not wish to appoint the Manager as an agent to act on their behalf.

Member 17 - Surname: (Mr./Mrs./Ms./Miss) _____

Christian Names: _____ Preferred name: _____

Address: _____ Post Code: _____

Postal Address: _____ Post Code: _____

Date of Birth: _____ Email address: _____

Home Phone: _____ Mobile No: _____

Greyhound Racing Club nearest your residence: _____

Signature: _____ Date: _____

Member 18 - Surname: (Mr./Mrs./Ms./Miss) _____

Christian Names: _____ Preferred name: _____

Address: _____ Post Code: _____

Postal Address: _____ Post Code: _____

Date of Birth: _____ Email address: _____

Home Phone: _____ Mobile No: _____

Greyhound Racing Club nearest your residence: _____

Signature: _____ Date: _____

Member 19 - Surname: (Mr./Mrs./Ms./Miss) _____

Christian Names: _____ Preferred name: _____

Address: _____ Post Code: _____

Postal Address: _____ Post Code: _____

Date of Birth: _____ Email address: _____

Home Phone: _____ Mobile No: _____

Greyhound Racing Club nearest your residence: _____

Signature: _____ Date: _____

The information collected on this form is for the purpose of providing registration under the Racing Act 2002. This information may be passed to third parties with bona fide industry connections. Where an applicant does not consent to the disclosure of information to such third parties please contact GQL in writing. Some personal information can be disclosed to agencies without consent where required by law.

HOBBYIST DECLARATION

Only complete this form if you are a genuine hobbyist who is not able to claim a credit for GST paid on your greyhound racing purchases. If you wish to be able to claim back GST that you pay on your purchases you should register for GST with an ABN (Australian Business Number) and NOT complete this form.

**STATEMENT IN ACCORDANCE WITH SECTION 12-190(6) OF A NEW TAX SYSTEM
PAY AS YOU GO ACT 1999.**

Owner/Partnership/Syndicate Name:.....
Please enter name in full - or Syndicate or Partnership name

Partnership/Syndicate Manager: **(if applicable)**.....
Name in full

hereby declare that any stake money* earned will be won as an individual and will be paid in return for providing a greyhound to race where:

- a) the supply is made in the course or furtherance of an activity, or series of activities, one as a recreational pursuit or hobby:

OR

- b) the supply is, for the other entity, wholly of a private or domestic nature.

Should the declaration change at any time I hereby agree to notify the State Controlling Body/relevant Club of such a change with 7 days.

Signed:.....Dated.....

- includes prize money, trophies, appearance/starter fees, unplaced stake monies, bonus or subsidy payments and starters subsidies above \$50.00.

In accordance with the Privacy Act (IS 42) the information collected on this form is for the purpose of payment of prize money. This information may be passed to third parties with bona fide industry connections. Where an applicant does not consent to the disclosure of this information to such third parties please contact GQL in writing. Some personal information can be disclosed to agencies without consent where required by law.