

**APPLICATION FOR REGISTRATION OF
A GREYHOUND TRAINER
NORTHERN TERRITORY LICENSING COMMISSION**

FEE \$40.00

FOR YEAR ENDING FEBRUARY 200...

ALL DETAILS TO BE COMPLETED IN BLOCK LETTERS

FULL NAME
(Given Names) (Surname)

FULL ADDRESS
.....Postcode.Telephone No.

DATE OF BIRTH/...../.....OCCUPATION

I hereby apply for registration as a Trainer with the Commission and I acknowledge that any registration granted to me is subject to the following conditions:

- (a) That the registration may be revoked at any time by the Commission in accordance with the rules of greyhound racing.
- (b) In consideration of the Licensing Commission granting this application I agree to be bound by and to comply with all such rules and statutory provisions in respect to Greyhound Racing and the registration of greyhounds as shall for the time being and from time to time be in force and be made by the said Commission and all decisions and directions that shall from time to time be made thereunder by the Commission or by any other authority or person authorised under such rules to make the same.
- (c) That no persons other than persons registered with the Commission or other approved authority shall at any time during the currency of this registration assist in the training of or handling of greyhounds in my care.
- (d) That I will notify the Commission of the names of all greyhounds domiciled in my kennels for a period exceeding 72 hours and to notify the Commission in writing forthwith of the names of all greyhounds removed from my kennels.
- (e) That I undertake in the event of registration being granted to me to observe the following conditions when exercising greyhounds in any public place, street or park.
 - (1) such greyhounds shall be properly muzzled and on a leash
 - (2) one person shall not exercise more than four greyhounds at any one time
 - (3) no greyhound shall be exercised in any public park without the consent of the authority in control of that park.
- (f) That I will notify the Commission forthwith of any change (temporary or otherwise) in the address of my kennels or my residence.
- (g) That I agree to open my kennels for inspection at any time by an authorised officer of the Commission.
- (h) That I will undertake to notify the Commission in writing within 72 hours of any change in the answers given to the questions or details submitted in this application that may affect the continuance of such registration.

I certify that the information given in this application above is true and accurate.

Signature

Witnessed by

Date signed

ATTACHED ARE TWO PASSPORT SIZED PHOTOGRAPHS OF MYSELF

SUBMIT APPLICATIONS TO:
Territory Business Centre
Development House, Ground Floor
76 The Esplanade, Darwin NT
PO BOX 9800 Darwin NT 0801
Phone (08) 8982 1700 Fax (08) 8982 1725

ALICE SPRINGS
SUBMIT APPLICATIONS TO:
Racing, Gaming and Licensing Division
Peter Sitzler Building,
67 North Stuart Hwy Alice Springs NT 0870
PO Box 9800 Alice Springs NT 0871
Phone (08) 8951 8452 Fax (08) 8951 8591

KATHERINE
SUBMIT APPLICATIONS TO:
Territory Business Centre
1 Randazzo Building
18 Katherine Terrace Katherine NT 0850
PO Box 9800 Katherine NT 0851
Phone (08) 8973 8180 Fax (08) 8973 8188

FOR ENQUIRES OR
ASSISTANCE CONTACT:
Racing, Gaming and Licensing
1st Floor Enterprise House
Cnr Knuckey & Woods Street, Darwin NT
Phone (08) 8999 1800 Fax (08) 8999 1888

TENNANT CREEK
SUBMIT APPLICATIONS TO:
Shop 2, Barkly House
Cnr Davidson and Paterson Streets
PO Box 9800 Tennant Creek 0861
Phone (08) 8962 4411 Fax (08) 8962 4413

QUESTIONNAIRE

1. Have you ever previously been registered as an owner, trainer, attendant, spokesman, bookmaker or bookmaker's clerk?
YES/NO
If the answer is YES, state in which capacity you were registered and by whom.
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2. Have you at any time been disqualified, suspended warned off, fined or listed as a defaulter by any racing authority? YES/NO
If the answer is YES, give particulars
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3. Have you ever been found guilty of an offence punishable by fine or imprisonment?
If the answer is YES, give particulars
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4. State particulars of your kennels. Include number of kennels, type of construction and security precautions taken.
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5. What experience have you had with regard to the training of greyhounds?
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DIAGRAM OF KENNELS

FOR OFFICE USE ONLY

Date Received..... Cash Receipt No.....