

VISITING STABLE EMPLOYEE TRACKRIDER APPLICATION

FOR PERIOD ENDING 30th April, 2019



TO: THE BOARD OF TRNT
GPO BOX 589, DARWIN NT 0801
Ph: (08) 8944 7500

APPLICATIONS MUST BE LODGED AT THE OFFICES OF THE TRNT
AND WILL NOT BE ACCEPTED WITHOUT THE FOLLOWING;

- COMPLETED APPLICATION FORM
- LICENCE FEE:NC
- INSURANCE STABLES/TRACKWORK:NC
- PHOTO: ONE Current Passport size facial photograph
- CLEARANCE FROM PREVIOUS AUTHORITY (if applicable)
- PROOF OF IDENTITY: New applications must be accompanied by birth certificate, current drivers licence or passport
- **(National Medical Certificate Required Completed by Approved Medical Officer)**

This License will only be current whilst the applicant is within the Northern Territory.

SECTION 1: Personal Details (PLEASE PRINT)

SURNAME: GIVEN NAME/S:

DATE OF BIRTH: / / PLACE OF BIRTH:

RESIDENTIAL / POSTAL ADDRESS:

SUBURB/CITY: STATE: POST CODE:

MOBILE: PHONE (OTHER):

EMAIL ADDRESS:

HAVE YOU BEEN PREVIOUSLY OR ARE YOU CURRENTLY LICENSED BY THIS OR ANY RACING BODY?

CURRENTLY / PREVIOUSLY as STATE SEASON

HAVE YOU COMPLETED ANY INDUSTRY TRAINING YES NO

If yes what accreditation have you gained.

Track work Helmet Make _____ Standard _____ Date of manufacture ____ / ____ / ____

STABLES & TRACK

| | | |
|--------------------|--|-------|
| OFFICE USE ONLY: | | PHOTO |
| DATE: _____ | BADGE/ID: <input type="checkbox"/> NO.: _____ | |
| AMOUNT: \$ _____ | HISTORY/CHECKS: <input type="checkbox"/> _____ | |
| INVOICE NO.: _____ | ENTERED: _____ | |

| | |
|---|---|
| Have you ever been refused a licence or registration or had a licence revoked or cancelled by any Racing Control Body? | YES/ NO (please circle) If Yes show details on separate sheet and attach |
| Have you ever been suspended, disqualified, warned off, fined or listed as a defaulter by any Racing Control Body? | YES/ NO (please circle) If Yes show details on separate sheet and attach |
| Have you ever been convicted of any criminal offence punishable by fine or imprisonment? | YES/ NO (please circle) |
| Have you ever been or are you now subject to a bond or recognizance? | YES/ NO (please circle) |
| Are there any current civil or criminal proceedings (or charges) pending against you? | YES/ NO (please circle) If Yes for any of the above show details on a separate sheet and attach (remains confidential) |
| Have you ever been declared as bankrupt or are there bankruptcy proceedings against you? | YES/ NO (please circle) If Yes show details on separate sheet and attach |
| Ongoing requirement to inform Thoroughbred Racing NT regarding any civil or criminal proceedings (or charges) pending against you: After submitting this application, you are required to inform the Thoroughbred Racing NT Integrity Department, within 7 days, of any criminal charges being laid or civil proceedings issued against you. | |

NEXT OF KIN EMERGENCY CONTACT (please provide the following details to be used by the Club or their officials in the case of an emergency):

| NAME | RELATIONSHIP TO YOU | CONTACT PHONE NUMBER |
|------|---------------------|----------------------|
|------|---------------------|----------------------|

I acknowledge that if the applicant departs the Northern Territory this registration will automatically be null and void and on return the applicant must reapply for registration.

SECTION 2: Conditions of Licence

In the event of such licence being granted, I agree:

- To observe and be bound by the Rules of Racing in force from time to time during the currency of such licence, or any renewal thereof, and also such Rules, Regulations, Conditions and Directions as may from time to time be made or given by the Committee, Stewards or Officials of the Club.
- Not to make any public statement or comment concerning any matter currently the subject of investigation or inquiry before the Stewards, Board, Committee or Appeals Body.

Thoroughbred Racing NT collects personal information about you when you apply for a licence pursuant to the Northern Territory Racing and Betting Act and the Rules of Racing. Thoroughbred Racing NT, as part of its licensing and disciplinary processes may disclose such information to third parties as part of the process of considering whether to grant or maintain your licence. You do not have to supply any information sought but failure to do so may result in your application for a licence being refused or withdrawn. By completing and submitting this form, you authorise Thoroughbred Racing NT to collect, use and disclose personal information about you for the purpose of the Racing and Betting Act and the Rules of Racing.

APPLICANT SIGNED: DATE:

I hereby declare that all the particulars provided in this application are true and correct

SECTION 3: Declaration by Employer

Pursuant to the Rules of Racing, I hereby apply for the registration of

EMPLOYMENT CONDITIONS:

- FULL TIME
 PART TIME
 CASUAL
 UNPAID

TRAINERS NAME: SIGNED: DATE:

Trainers are reminded that no person under the age of thirteen (13) years is to be Employed in a stable and that no person under the age of fourteen (14) years is permitted to ride.

If the Employee is under the age of 16, the Employee's Parent or Guardian is required to complete the following:

I am aware that _____ has applied for registration as a Stable Employee/Trackwork P by the TRNT, and give my approval for such Registration.

PARENT/GUARDIAN NAME:

SIGNED: DATE: