

Application for Issue of a Bookmakers Licence

- FEE – Refer to current Gazette Program or visit www.hrnsw.com.au
- One passport size photo must accompany this application

Reference No – Office use only

Surname		Given Names	
Address			Postcode
Home Phone	Work Phone	Mobile	
Occupation	Email	D.O.B	

- | | Yes | No |
|--|--------------------------|--------------------------|
| 1. Have you been convicted of any criminal offence within the last 10 years?
<small>If Yes give details</small> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Have you been refused a licence by a Controlling Body of Harness, Horse or Greyhound Racing in any State/ Country?
<small>If Yes give details</small> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Have you been disqualified or suspended by a Controlling Body of Harness, Horse or Greyhound Racing in any State/Country?
<small>If Yes give details</small> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Have you ever held a Bookmakers, Clerks, Trainers or Drivers Licence before?
<small>If Yes give details & the season last registered</small> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Please complete the financial statement overleaf | | |

I hereby apply to be registered as a Bookmaker with Harness Racing NSW for the year ending 31 December 20_____

I make this application pursuant to the Rules of Harness Racing for the State of New South Wales, and I acknowledge that I hereby become subject to and bound by the said Rules of Harness Racing and the acts and decisions of HRNSW, and all persons authorised by the said Rules of Harness Racing to act and give decisions, and I undertake and agree to observe and comply with the said Rules of Harness Racing and such acts and decisions. I declare that above particulars to be true to the best of my knowledge and belief. I hereby authorise the New South Wales Commissioner of Police to make available to HRNSW details of any convictions and information relating to me.

I agree to follow my vocation in accordance with the recognised Rules of Harness Racing and Betting and to conform with and be bound by the By-Laws, Regulations and Rules of Harness Racing which are now in force or which may at any time hereafter be adopted by HRNSW.

And I further consent to HRNSW, its Register or Stewards cancelling any privilege that may be granted in pursuance of this application should they or he so decide to do, in which event I will have no claim whatsoever for refund of the whole or any portion of the payment made as above.

Date	Signature of Applicant (must be witnessed)
Witness Name	Witness Signature

Office Use Only

Licence No:	LICENCE APPROVED
Date of Issue:	

A person under the age of twenty one (21) years shall not be eligible to hold a Bookmaker's Licence.

(See over)

Guarantee Requirements

In accordance with Rule 598 (L.R.) (c) Bookmakers are required to lodge with the Authority either a cash amount or a guarantee from a bank, building society or satisfactory bookmakers cooperative society in accordance with the following scale: -

Harold Park	\$50,000
Provincial Rings	\$30,000
All other Harness Racing rings	\$20,000

Under No circumstances will personal guarantees be accepted.

Details of Guarantee

Name of Guarantor	Guarantee must accompany application	Amount of Guarantee \$
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Financial Statement

This section MUST be completed by applicants who DO NOT hold a guarantee issued by the N.S.W Bookmakers Cooperative Society

Assets

List only those assets in which you have a controlling interest

Cash on deposit: -

	Amount
Institution	\$
Institution	\$

✓ Please make sure you include copies of certified statements covering the last 6 months (to be submitted with application).

Other investments

	\$
	\$
House value Address	\$
Equity	%
Car/s Give details	\$
Equity	%
Other assets Give details	\$
Equity	%
Total Assets	\$

Liabilities

List all mortgages, liens and other charges held in respect of the above listed assets

Item	Mortgage/lien	
		\$
		\$
		\$
		\$
		\$
Total Liabilities		\$

I do hereby declare the above information to be true in every detail

Applicant Signature	Sign & Date	Witness Signature	Sign & Date
Name of Witness	Please print name	Address of Witness	