

PO Box 1034 BANKSTOWN NSW 1885 T 02 9722 6600 F 02 8580 5792 licensing@hrnsw.com.au www.hrnsw.com.au

HRNSW LICENCE UPGRADE APPLICATION STABLEHAND, DRIVING TO C GRADE TRAINER

Please note that this Licence Upgrade Application is to be completed in full and returned to Harness Racing NSW for processing. Forms received that are either incomplete or incorrectly filled in will be returned to the applicant upprocessed.

either incomplete or incorrectly filled in will be returned to the applicant unprocessed.										
LICENCE UPGRADE APPLICATION CHECKLIST										
Mark boxes with either a V	or X as appropriate:									
I hold a currer	nt Stablehand, Driving lic	ence with HRNSW;								
I have attaine	ed the age of eighteen (18	3) years;								
I have held a S	Stablehand, Driving licen	ce for a minimum of six (6) con	secutive calendar	months;						
I have underta	aken a HRNSW Medical A	Assessment during the last six (6) calendar month	1S (see note b	below);					
I _ I	Scheme Policy Statement	NSW Mini Trotters Program and to assist in determining whether	•		•	_				
I have (if requ	uired to do so) enrolled in	n the HRNSW Education & Welf	are Program;							
I have applied	I for (or already have reg	gistered) a Property Identification	on Code (PIC) for r	ny intende	ed stabling premises.					
of the overall licence	e upgrade process. If you cur	re, and have not undertaken a HRNSV rrently hold a Stablehand, Non-Drivi Medical Assessment forms are availab	ng licence, you <u>will</u> be	e required to	o undertake and submit a	HNSW	/ Medical Assessment			
		ed are subject to review by the lot a Licence Upgrade Application	_		_	may n	ecessitate further			
	vailable at <u>www.hrnsw.co</u>	d training requirements associand training requirements associated than the secondary of th								
		ng of your Licence Upgrade Appocessing period may be held ur								
		APPLICANT INFOR	RMATION							
Title Su	ırname		Given Nam	es						
Residential Address							Post Code			
Postal Address (if differen	t from residential)						Post Code			
Home Phone		Work Phone			Fax Number					

Please ensure that the information specified on the reverse of this form is provided before submitting this Licence Upgrade Application to HRNSW

Date

Place of Birth

Date of Birth

Mobile Number

email address

Signature of Applicant

Licence Number

Mandatory Provision of Tax File Number / Bank Account Information

TAX FILE NUMBER

licencing upgrade process a	our Tax File Number (TFN) and that failure to provide this arness Racing NSW deducting	information will result in	your licence applicatio	n being returned						
Information may result in me	arness racing ison according	Withinolding rax from pays	THEFITS CHACK HILDY DE MAN	1						
BANK ACCOUNT INFORMATION										
Account Name :										
Bank / Branch :										
BSB										
Account										
of \$290 (unless the Stable ee of \$290 will be payable) icence upgrade fees will	not be deducted until the	sued more than nine mo	onths prior to the su	bmission date o						
The current fee schedule is										
Stablehand, Driving (Ove		\$ 230								
Stablehand, Driving (Und	ier 10 <i>)</i>	\$ 260								
	CREDIT CA	ARD PAYMENT OPTION	ON (VISA OR MAS	STERCARD ON	ILY)					
Card Number:										
Expiry Date :		CVV (3 digit valu	ue printed on back of ca	rd)	\$					
Cardholders Name :			Cardholders Signature:							
OFFICE USE ONLY										
Customer Code		Invoice Number			Licence Number	r				