

## **Small Breeder Fund Application**

To be completed by persons wanting to apply to the Small Breeder Fund.

COMPLETE THE FOLLO	OWING PERSONAL D	ETAILS:	
	First Names:		
Name of Applicant	Surname:		
	Street:		
Address	Suburb:		
	Town/City:		Postcode:
	Home Phone:	Mo	bile:
Contact Details	Email:	Fax	:
Complete the follo	wing application	n details:	
Have you previously	y applied to this	fund?	
Yes No			
If YES, when?			
Date:			
Sire:			
Are you purchasing	a straw that:		
Has already bee	en imported to N	ew Zealand 🔲 You are importi	ng to New Zealand yourself
How many registere	ed breeding fem	ales do you currently own?	
How many litters ha	ave you bred in t	he last year?	
Details of straw for	this application:		
Sire:			
Straw number:			
OFFICE USE ONLY:			
Number of breeding fen	nales confirmed:	Number of litters confirmed:	Copy of invoice attached: Yes/No
Sire's details confirmed:		Straw reference:	Approved/Declined (by Head of Welfare)
Amount approved:		Invoice number:	Date paid:



## **Privacy Declaration**

This information is being collected and will be held at the office of Greyhound Racing New Zealand (GRNZ) in Wellington in accordance with the Privacy Act 2020 for administrative purposes only. Without the requested information, GRNZ may not be able to process the matters relating to this form.

You agree that the personal information supplied by you may be retained by GRNZ and shared with Greyhounds Australasia, who will not disclose the information unless for administrative purposes or if required by law. You can access your personal information from the GRNZ office on Level 4, 106-110 Jackson Street, Petone, Wellington for inspection and/or amendment as necessary.

Note: Your information may be sent to Greyhounds Australasia for administrative purposes. Greyhounds Australasia may not protect your information in a way that provides comparable safeguards to the New Zealand Privacy Act 2020.

Rules Declaration (all applicants to read)			
I,(applicant's name), certify that the information			
within this application is true and correct.			
I agree to be bound by and recognise the rules of Greyhound Racing New Zealand (GRNZ), or any other authority or person authorised by such rules.			
I will provide additional information, as shall be reasonably required by the GRNZ, in respect of this application.			
At the date of this application I am 18 years of age or older OR my parent/legal guardian has signed the Consent of Minors declaration above.			
I have read and understood the Greyhound Racing New Zealand Health and Welfare Standards and understand the consequences of non-compliance.			
Any certificate of license that may be issued to me is, and will remain, the property of GRNZ and must be produced or returned on the demand of an authorised GRNZ officer or by a RIU Stipendiary Steward.			
I am aware that my licence can be revoked by GRNZ at any time (Rule 83.1).			
I agree to notify GRNZ of any changes to my personal details as soon as possible (within 3 days) so my records can be updated.			
I am aware of an agreement to be bound by the conditions of authority/licensing as detailed in this form.			
Applicant's signature Date			