

# Authority to Breed

Breeder to complete this form, consenting to another person using the greyhound for breeding purposes.

Please note that the Breeder must hold a current Owners Licence.

GREYHOUND DETAILS:	
Greyhound Name:	
Earbrand:	Microchip:
OWNER DETAILS:	
Name of Owner	First Name:
	Surname:
Owner Address	Street:
	Suburb:
	Town/City: <span style="float: right;">Postcode:</span>
Owner Contact Details	Phone: <span style="float: right;">Mobile:</span>
	Email:
AUTHORISED BREEDER DETAILS:	
Name of Breeder	First Name:
	Surname:
Breeder Address	Street:
	Suburb:
	Town/City: <span style="float: right;">Postcode:</span>
Breeder Contact Details	Phone: <span style="float: right;">Mobile:</span>
	Email:
Address Where Greyhound Will Reside	Street:
	Suburb:
	Town/City: <span style="float: right;">Postcode:</span>
AUTHORISATION DETAILS:	
Commencement of Authorisation Date:	
Expiry Details:	<input type="checkbox"/> Current Litter Only <input type="checkbox"/> Until Further Notice <input type="checkbox"/> Specify Date:
OFFICE USE ONLY:	
Loaded:	Scanned:

SIGNATURES:	
Owner/s:	Date:
	Date:
Authorised Person/s:	Date:
	Date:

**Note:** If the greyhound is owned by a Syndicate, then only the Syndicate Manager is required to sign.

### Consent for Minors Declaration

*Parent or legal guardian to complete this Consent of Minors declaration (applicants under 18 years of age):*

I, .....(name), of .....(address), being the legal guardian/parent of the applicant, hereby consent to him/her being registered with Greyhound Racing New Zealand (GRNZ). I understand that the applicant will be subject to the rules of the GRNZ.

\_\_\_\_\_  
**Signed**

\_\_\_\_\_  
**Date**



**Privacy Declaration**

This information is being collected and will be held at the office of GRNZ in accordance with the Privacy Act 1993 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, 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, Lower Hutt for inspection and/or amendment as necessary.

**Breeder Declaration**

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 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.

\_\_\_\_\_  
**Breeder’s Signature**

\_\_\_\_\_  
**Date**

**Bank Account details (required for any future payments e.g., owner’s bonus and refunds):**

Bank Account name: .....

Bank Account number:

Please update details with GRNZ as required.