

C5: 01-21

NEW ZEALAND THOROUGHBRED RACING INC

PO Box 38386, Wellington Mail Centre 5045 Telephone: (04) 576 6240 | Facsimile: (04) 568 8866 Web: <u>loveracing.nz</u> | Email: <u>licensing@nztr.co.nz</u> Please attach a recent passport photograph of yourself. This is required for all new applicants.

FEE \$195.00

GST incl. GST No. 10-386-896

APPLICATION FOR CLASS D RIDER'S LICENCE (JUMPS LICENCE)

> As a holder of a Class D rider's licence you are able to participate in Races, Barrier Trials, Jump Outs and General Trackwork Sessions

YOUR PI	ERSONAL DETAILS				
1.	Title (Mr/Mrs/Miss/Ms)				
2.	Surname				
3.	Given Names (in full)		1000	1200	1 X
4.	Preferred Name (to appear in racebooks)			, (P) (B)	
5.	Date of Birth / Place of Birth			1	1. 1
6.	Nationality	A Property of	12.1		
7.	Residential Address	1.3			1 > 1 > 1
					Postcode
8.	Postal Address	1	The second secon		
					Postcode
9.	Home Phone				
10.	Mobile Phone				
11.	Email Address				
12.	Facsimile Number				
13.	IRD Number				
14.	GST Number				
15.	NZ Drivers' Licence or Passport Number				
16.	Bank Account Name			- 11	
17.	Bank Account Number (including Bank and Branch Number, Account Number and Suffix)				

RIDING I	DETAILS		
18.	Riding Weight (in kg)		
19.	State of Health		
20.	Training Facility(ies) where you ride work		
21.	(a) Number of Career Flat Rides	(b) Number of Career Flat Wins	
	(c) Number of Career Jumping Rides	(d) Number of Career Jumping Wins	

EMPLOY	EMPLOYMENT DETAILS		
22.	Are you permanently employed in a Training Stable? If "Yes", provide full details.		
23.	Do you currently have any other form of occupation? If "Yes", provide full details.		

HORSE	HORSE OWNERSHIP		
24.	Are you an Owner, Part-Owner, Lessee or Part-Lessee of any horse under the provisions of the New Zealand Rules of Racing? If "Yes", provide details of horses.		

LICENSE	EHISTORY	
25.	Have you previously held any licence in New Zealand or any overseas racing jurisdiction (including Harness and Greyhound control bodies)? "Yes" or "No". If "Yes", provide full details.	
26.	Have you ever had a licence disqualified, revoked, suspended, withdrawn or refused by any Racing Authority? "Yes" or "No". If "Yes", provide full details.	

CRIMIN	CRIMINAL HISTORY				
27.	Have you ever been convicted in a District or other Court of any offence against the statutory laws of New Zealand or any other country? "Yes" or No". If "Yes", provide full details.				
28.	Have you ever been charged with any offence relating to cruelty to animals? "Yes" or "No". If "Yes", provide full details.				

FINAN	INANCIAL ISSUES		
29.	Have you ever been declared Bankrupt? "Yes" or "No". If "Yes", provide full details.		
30.	Have you made arrangements with an adviser in relation to the preparation of your financial accounts?		
31.	Do you lodge tax returns on an annual basis?		
32.	Have you lodged your tax return for the previous financial year? If "No", provide reasons why.		

CONTACT PERSON (in case of emergency)			
33.	Name		
34.	Relationship to you		
35.	Best contact number		

HEALTH AND SAFETY

The Health and Safety at Work Act 2015 (the HSW Act), which has replaced the Health and Safety in Employment Act 1992 came into force on 4 April 2016.

The HSW Act creates the concept of a "person conducting a business undertaking" (PCBU). This includes all businesses or undertakings regardless of whether a person conducts a business alone or with others, or whether or not it is for profit of gain.

Most Jockeys will be a PCBU under the HSW Act and must ensure they comply with the new regulations. Further details are available on the NZTR website: <u>loveracing.nz/NZTR/Resources/Health-and-Safety.aspx</u>.

By signing this form I undertake to NZTR that:

- I understand that I have obligations under the Health and Safety at Work Act 2015 and that it is my responsibility to meet those obligations;
- I will carry out my obligations under the Health and Safety at Work Act 2015;
- I will cooperate absolutely with any health and safety investigation conducted by the RIU, NZTR or WorkSafe;
- I will immediately report any incident that must be reported under the Health and Safety at Work Act or as directed by NZTR to the appropriate authorities;
- I will comply with any health and safety policies at any racing venue;

I acknowledge that my fitness to hold a licence depends on my compliance with these undertakings and that NZTR may cancel or suspend my licence if I breach them.

PRIVACY ACT 2020

This information is being collected and will be held by New Zealand Thoroughbred Racing (NZTR) at 106-110 Jackson Street, Petone, Wellington. It is being collected for the purpose of processing the matter the subject of this form. You agree that the personal information supplied by you may be retained by NZTR and disclosed to and retained by third parties for the purpose of processing relevant forms, direct marketing or providing you with information on events, products and services. NZTR will not use or disclose your personal information in any way, other than that disclosed in this policy or with your prior consent. If you do not provide the requested information then NZTR may not be able to process the matters the subject of this form. That may result in a breach of the Rules of Racing. You may access your personal information (if it is readily retrievable) at the above address and you may request NZTR to update or correct that information. You may also request to be removed from the NZTR database for the purpose direct marketing and providing you with information on events, products and services by notifying NZTR by email or by letter to the above address. If you do not wish your information to be retained in our database, or disclosed and retained by third parties for the purpose of providing you with information on events, products and services, then please tick the box below.

CREDIT CHECKING & DEBT COLLECTION

You also agree that the personal information supplied by you in this form or during your registration with NZTR may be disclosed at any time by NZTR to its credit checking agency for the purposes of that agency performing its credit reporting services, which will include carrying out credit checks and you authorise the credit checking agency to disclose information to NZTR which is relevant to the provision of credit to you (and for directly related purposes including debt collection). You agree that this may result in NZTR being provided with other personal information held by that agency about you, and your personal information that NZTR discloses to the credit checking agency (including notice of any default on payment on your behalf) may be used and disclosed to other third parties by the credit checking agency when performing its credit reporting services.

Payment of all accounts held in your name with NZTR, which relate to fines is due by the 20th day of the month following the month in which the costs are incurred. Any accounts remaining unpaid after the due date will incur a late payment fee of \$25.00 per month while the debt remains unpaid as well as interest of 12.5% per annum on the amount unpaid from the date payment is due until the date payment (including any applicable late payment fees and interest) is received in full. You will also be liable to pay all costs incurred in recovering the amount owed to NZTR, including any legal fees, debt recovery fees or agency fees. Furthermore, NZTR reserves the right to withdraw your line of credit, refuse nominations for horses and place you on the NZTR Arrears List until the outstanding amount is received in full. The full NZTR Debt Collection Policy Process is available from the NZTR website loveracing.nz

DECLARATION BY APPLICANT

I do hereby declare that:

1.	By signing and submitting this form to New Zealand Thoroughbred Racing Inc (NZTR) I have read the form and all of the information that I have provided to NZTR in this application form is true and correct in every particular.
2.	I understand that NZTR will rely upon the information I have provided in this application form for the purpose of determining whether I am an appropriate person to receive a Class D rider's licence.
3.	I understand that NZTR may take disciplinary action against me in the event that the information I have provided in this application form is false or misleading in any particular, and that disciplinary action may include revocation of any licence issued to me.
4.	I acknowledge that the provision of any false, misleading or inaccurate information on this form may result in me being prosecuted under the NZTR Rules of Racing or otherwise. I confirm with the requirements listed therein and that I:
	 (a) have attained the age of 18 years; (b) am competent to ride in Jumping Races, jumping trials (including jump-outs and tests for certification purposes) and trackwork; (c) have ridden in a Jumping Race in the 18 months prior to the date of this application; and (d) am of good character.
5.	I have obtained a copy, and informed myself, of the NZTR Rules of Racing and it is my obligation as a holder of a Class D rider's licence to update myself in relation to NZTR's policies and any rule changes and to abide by those policies and Rules of Racing.
6.	In accordance with Rule 656 of the NZTR Rules of Racing, I consent to providing a sample of my blood, breath, urine, saliva or sweat (or more than one thereof), as and when required by a Stipendiary Steward or Investigator, for the purposes of drug and alcohol testing.
7.	I am not currently subject to any disciplinary action initiated by any other Racing Authority in New Zealand or overseas and I will immediately inform NZTR should any other Racing Authority in New Zealand or overseas and I will immediately inform NZTR should any other Racing Authority in New Zealand or overseas and I will immediately inform NZTR should any other Racing Authority in New Zealand or overseas and I will immediately inform NZTR should any other Racing Authority in New Zealand or overseas and I will immediately inform NZTR should any other Racing Authority in New Zealand or overseas and I will immediately inform NZTR should any other Racing Authority in New Zealand or overseas and I will immediately inform NZTR should any other Racing Authority in New Zealand or overseas and I will immediately inform NZTR should any other Racing Authority in New Zealand or overseas and I will immediately inform NZTR should any other Racing Authority in New Zealand or overseas and I will immediately inform NZTR should any other Racing Authority in New Zealand or overseas and I will immediately inform NZTR should any other Racing Authority in New Zealand or overseas and I will immediately inform NZTR should any other Racing Authority in New Zealand or overseas and I will immediately inform NZTR should any other Racing Authority in New Zealand or overseas and I will immediately inform NZTR should any other Racing Authority in New Zealand or overseas and I will immediately inform NZTR should any other Racing Authority in New Zealand or overseas and I will immediately inform NZTR should any other Racing Authority in New Zealand or overseas and I will immediately inform NZTR should any other Racing Authority inform NZTR should any other Racing Authority inform NZTR should any other Racing Au
8.	I understand that if I do not pay any amount owed to NZTR within the required time, NZTR may set-off this debt against any prizemoney due and owing to me through the TROSA system administered by NZTR.
9.	I authorise NZTR to make deposits via Electronic Funds Transfer into the bank account nominated by me in this application form. I understand that if my bank account details change, I am required to notify NZTR in writing of the new bank account details and that until I notify NZTR in writing of the change, NZTR may still make deposits into the account nominated in this form.
10.	 For GST purposes relating to the supply of services by me (the Supplier), to NZTR (the Recipient): (a) I (the Supplier) acknowledge that if I am registered for GST purposes, I will notify NZTR in writing if I cease to be registered for GST purposes in the future, and if I am not currently registered for GST purposes, I will notify NZTR in writing if I become registered for GST purposes in the future; (b) I (the Supplier) will not issue tax invoices in relation to any prizemoney (supplies) that NZTR may have to pay me; (c) NZTR (the Recipient) can issue tax invoices in respect of prizemoney (supplies) that it has to pay me; (d) I (the Supplier) will not issue tax invoices in respect of the supplies; (e) I understand that NZTR is registered for GST purposes and that it will notify me in writing if it ceases to be GST registered or it is otherwise unable to prepare Buyer Created Tax Invoices (BCTI) on my behalf; (f) I understand that NZTR can only issue a BCTI on my behalf if it complies with the requirements established under legislation.
	I authorise NZTR to disclose information provided by me in this application form to: (a) All Racing Authorities in New Zealand and overseas; (b) The persons specified in this application form; (c) Government Departments and regulatory authorities; (d) Persons currently unknown, for the purpose of complying with statutory obligations requiring NZTR to disclose information.
12.	I consent to NZTR contacting all Authorised Wagering Operators in New Zealand and overseas for the purpose of determining whether I am betting in contravention to the Rules of Racing. Lalso consent to those third parties disclosing information to NZTR about any betting I engage in.

13.	I consent to NZTR contacting other Racing Authorities in New Zealand and overseas and I consent to those bodies disclosing any information that may be requested at any
	time by NZTR.

14. I hereby consent to the New Zealand Police disclosing to NZTR any information that they may have pursuant to this application. I understand that any record of criminal convictions I might have will be automatically concealed if I meet the eligibility criteria stipulated in Section 7 of the Criminal Records (Clean Slate) Act 2004.

15. I have attached a recent passport sized photograph of myself (if not previously supplied within the last 12 months).

16. I undertake to provide to NZTR a medical certificate from a registered Medical Practitioner to support my application for annual renewal of my Class D rider's licence.

Full Name of Applicant	Full Name of Witness
Signature of Applicant	Signature of Witness
Date	Date

PAYMENT DETAILS

When the fee is paid this form constitutes a GST tax invoice. If a payment forms part of a taxable activity within the GST Act a copy should be retained for your records.				
I have paid by bank deposit: Date Depo	osited: Reference Used:			
New Zealand Thoroughbred Racing Inc - Bar	nk Account Number 01-0517-0063944-00. (Please use your name & form type as reference)			
Please charge my: Mastercard	Visa Amex Diners Club			
Card No:	Expiry: /			
Cardholder's Name:	Signature:			
NZ JOCKEYS' ASSOCIATION MEMBER	SHIP APPLICATION			
The fees applicable to NZJA membership are a	s follows:			
For all Flat and Jumping Rider	\$1.00 inc GST per ride			
Apprentice Riders	\$0.50 inc. GST per ride			
Only financial members of NZJA will qualify to receive the Rider Engagement Fee and the Minimum Ride Allowance				
I wish to be a member of the NZJA	⊇Yes □ No			
Name Of Rider:	Date of Birth:			
Signed:	Date:			