

**SCHEDULE B : TO BE COMPLETED NEW OWNER(S)**

**DECLARATION:** This is to certify that I/we have acquired the horse described herein and I/we agree to abide by the Rules and Regulations of Harness Racing. I/we declare that I/we are **over the age of 18 years** and that I/we are the only person(s) whom have any interest whatsoever in this horse and I/we further declare that all particulars contained within this application are true and correct. Note that the first named person will be regarded as the **Partnership Manager** for racing purposes and all prize money will be paid to the bank account nominated by each new part owner below.

**TO BE COMPLETED FOR EACH PART OWNER (IN BLOCK LETTERS) – MAXIMUM OF TWENTY (20) INDIVIDUALS**

1) Surname or Registered Name (Partnership Manager)	Given Names	Date of Birth	% Ownership
Address		Post Code	Primary Contact No
email address		SIGNATURE	
Are you a Hobbyist? <input type="checkbox"/>	Indicate YES or NO	Are you GST Registered? <input type="checkbox"/>	Indicate YES or NO
ABN Number (if GST Registered):			
Name In Which The Bank Account Is Held			
Banking Institution		Branch	
BSB No	-	Account No	-

2) Surname or Registered Name	Given Names	Date of Birth	% Ownership
Address		Post Code	Primary Contact No
email address		SIGNATURE	
Are you a Hobbyist? <input type="checkbox"/>	Indicate YES or NO	Are you GST Registered? <input type="checkbox"/>	Indicate YES or NO
ABN Number (if GST Registered):			
Name In Which The Bank Account Is Held			
Banking Institution		Branch	
BSB No	-	Account No	-

3) Surname or Registered Name	Given Names	Date of Birth	% Ownership
Address		Post Code	Primary Contact No
email address		SIGNATURE	
Are you a Hobbyist? <input type="checkbox"/>	Indicate YES or NO	Are you GST Registered? <input type="checkbox"/>	Indicate YES or NO
ABN Number (if GST Registered):			
Name In Which The Bank Account Is Held			
Banking Institution		Branch	
BSB No	-	Account No	-

4) Surname or Registered Name	Given Names	Date of Birth	% Ownership
Address		Post Code	Primary Contact No
email address		SIGNATURE	
Are you a Hobbyist? <input type="checkbox"/>	Indicate YES or NO	Are you GST Registered? <input type="checkbox"/>	Indicate YES or NO
ABN Number (if GST Registered):			
Name In Which The Bank Account Is Held			
Banking Institution		Branch	
BSB No	-	Account No	-

Independent Witness Signature	Witness Name	Date
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Address	Post Code
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Horse Name / Registration Number	Customer Code
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5) Surname or Registered Name		Given Names		Date of Birth	% Ownership
Address				Post Code	Primary Contact No
email address			SIGNATURE		
Are you a Hobbyist?	<input type="checkbox"/>	Indicate YES or NO	Are you GST Registered?	<input type="checkbox"/>	Indicate YES or NO
ABN Number (if GST Registered):					
Name In Which The Bank Account Is Held					
Banking Institution			Branch		
BSB No	<input type="text"/>	-	<input type="text"/>	Account No	<input type="text"/>
	<input type="text"/>		<input type="text"/>		<input type="text"/>

6) Surname or Registered Name		Given Names		Date of Birth	% Ownership
Address				Post Code	Primary Contact No
email address			SIGNATURE		
Are you a Hobbyist?	<input type="checkbox"/>	Indicate YES or NO	Are you GST Registered?	<input type="checkbox"/>	Indicate YES or NO
ABN Number (if GST Registered):					
Name In Which The Bank Account Is Held					
Banking Institution			Branch		
BSB No	<input type="text"/>	-	<input type="text"/>	Account No	<input type="text"/>
	<input type="text"/>		<input type="text"/>		<input type="text"/>

7) Surname or Registered Name		Given Names		Date of Birth	% Ownership
Address				Post Code	Primary Contact No
email address			SIGNATURE		
Are you a Hobbyist?	<input type="checkbox"/>	Indicate YES or NO	Are you GST Registered?	<input type="checkbox"/>	Indicate YES or NO
ABN Number (if GST Registered):					
Name In Which The Bank Account Is Held					
Banking Institution			Branch		
BSB No	<input type="text"/>	-	<input type="text"/>	Account No	<input type="text"/>
	<input type="text"/>		<input type="text"/>		<input type="text"/>

8) Surname or Registered Name		Given Names		Date of Birth	% Ownership
Address				Post Code	Primary Contact No
email address			SIGNATURE		
Are you a Hobbyist?	<input type="checkbox"/>	Indicate YES or NO	Are you GST Registered?	<input type="checkbox"/>	Indicate YES or NO
ABN Number (if GST Registered):					
Name In Which The Bank Account Is Held					
Banking Institution			Branch		
BSB No	<input type="text"/>	-	<input type="text"/>	Account No	<input type="text"/>
	<input type="text"/>		<input type="text"/>		<input type="text"/>

Independent Witness Signature	Witness Name	Date
Address		Post Code

9) Surname or Registered Name		Given Names		Date of Birth	% Ownership
Address				Post Code	Primary Contact No
email address			SIGNATURE		
Are you a Hobbyist?	<input type="checkbox"/>	Indicate YES or NO	Are you GST Registered?	<input type="checkbox"/>	Indicate YES or NO
ABN Number (if GST Registered):					
Name In Which The Bank Account Is Held					
Banking Institution			Branch		
BSB No	<input type="text"/>	-	<input type="text"/>	Account No	<input type="text"/>
	<input type="text"/>		<input type="text"/>		<input type="text"/>

10) Surname or Registered Name		Given Names		Date of Birth	% Ownership
Address				Post Code	Primary Contact No
email address			SIGNATURE		
Are you a Hobbyist?	<input type="checkbox"/>	Indicate YES or NO	Are you GST Registered?	<input type="checkbox"/>	Indicate YES or NO
ABN Number (if GST Registered):					
Name In Which The Bank Account Is Held					
Banking Institution			Branch		
BSB No	<input type="text"/>	-	<input type="text"/>	Account No	<input type="text"/>
	<input type="text"/>		<input type="text"/>		<input type="text"/>

11) Surname or Registered Name		Given Names		Date of Birth	% Ownership
Address				Post Code	Primary Contact No
email address			SIGNATURE		
Are you a Hobbyist?	<input type="checkbox"/>	Indicate YES or NO	Are you GST Registered?	<input type="checkbox"/>	Indicate YES or NO
ABN Number (if GST Registered):					
Name In Which The Bank Account Is Held					
Banking Institution			Branch		
BSB No	<input type="text"/>	-	<input type="text"/>	Account No	<input type="text"/>
	<input type="text"/>		<input type="text"/>		<input type="text"/>

12) Surname or Registered Name		Given Names		Date of Birth	% Ownership
Address				Post Code	Primary Contact No
email address			SIGNATURE		
Are you a Hobbyist?	<input type="checkbox"/>	Indicate YES or NO	Are you GST Registered?	<input type="checkbox"/>	Indicate YES or NO
ABN Number (if GST Registered):					
Name In Which The Bank Account Is Held					
Banking Institution			Branch		
BSB No	<input type="text"/>	-	<input type="text"/>	Account No	<input type="text"/>
	<input type="text"/>		<input type="text"/>		<input type="text"/>

Independent Witness Signature	Witness Name	Date
Address		Post Code

13) Surname or Registered Name		Given Names		Date of Birth	% Ownership
Address				Post Code	Primary Contact No
email address			SIGNATURE		
Are you a Hobbyist?	<input type="checkbox"/>	Indicate YES or NO	Are you GST Registered?	<input type="checkbox"/>	Indicate YES or NO
ABN Number (if GST Registered):					
Name In Which The Bank Account Is Held					
Banking Institution			Branch		
BSB No	<input type="text"/>	-	<input type="text"/>	Account No	<input type="text"/>
	<input type="text"/>		<input type="text"/>		<input type="text"/>

14) Surname or Registered Name		Given Names		Date of Birth	% Ownership
Address				Post Code	Primary Contact No
email address			SIGNATURE		
Are you a Hobbyist?	<input type="checkbox"/>	Indicate YES or NO	Are you GST Registered?	<input type="checkbox"/>	Indicate YES or NO
ABN Number (if GST Registered):					
Name In Which The Bank Account Is Held					
Banking Institution			Branch		
BSB No	<input type="text"/>	-	<input type="text"/>	Account No	<input type="text"/>
	<input type="text"/>		<input type="text"/>		<input type="text"/>

15) Surname or Registered Name		Given Names		Date of Birth	% Ownership
Address				Post Code	Primary Contact No
email address			SIGNATURE		
Are you a Hobbyist?	<input type="checkbox"/>	Indicate YES or NO	Are you GST Registered?	<input type="checkbox"/>	Indicate YES or NO
ABN Number (if GST Registered):					
Name In Which The Bank Account Is Held					
Banking Institution			Branch		
BSB No	<input type="text"/>	-	<input type="text"/>	Account No	<input type="text"/>
	<input type="text"/>		<input type="text"/>		<input type="text"/>

16) Surname or Registered Name		Given Names		Date of Birth	% Ownership
Address				Post Code	Primary Contact No
email address			SIGNATURE		
Are you a Hobbyist?	<input type="checkbox"/>	Indicate YES or NO	Are you GST Registered?	<input type="checkbox"/>	Indicate YES or NO
ABN Number (if GST Registered):					
Name In Which The Bank Account Is Held					
Banking Institution			Branch		
BSB No	<input type="text"/>	-	<input type="text"/>	Account No	<input type="text"/>
	<input type="text"/>		<input type="text"/>		<input type="text"/>

Independent Witness Signature	Witness Name	Date
Address		Post Code

17) Surname or Registered Name		Given Names		Date of Birth	% Ownership
Address				Post Code	Primary Contact No
email address			SIGNATURE		
Are you a Hobbyist?	<input type="checkbox"/>	Indicate YES or NO	Are you GST Registered?	<input type="checkbox"/>	Indicate YES or NO
ABN Number (if GST Registered):					
Name In Which The Bank Account Is Held					
Banking Institution			Branch		
BSB No	<input type="text"/>	-	<input type="text"/>	Account No	<input type="text"/>
	<input type="text"/>		<input type="text"/>		<input type="text"/>

18) Surname or Registered Name		Given Names		Date of Birth	% Ownership
Address				Post Code	Primary Contact No
email address			SIGNATURE		
Are you a Hobbyist?	<input type="checkbox"/>	Indicate YES or NO	Are you GST Registered?	<input type="checkbox"/>	Indicate YES or NO
ABN Number (if GST Registered):					
Name In Which The Bank Account Is Held					
Banking Institution			Branch		
BSB No	<input type="text"/>	-	<input type="text"/>	Account No	<input type="text"/>
	<input type="text"/>		<input type="text"/>		<input type="text"/>

19) Surname or Registered Name		Given Names		Date of Birth	% Ownership
Address				Post Code	Primary Contact No
email address			SIGNATURE		
Are you a Hobbyist?	<input type="checkbox"/>	Indicate YES or NO	Are you GST Registered?	<input type="checkbox"/>	Indicate YES or NO
ABN Number (if GST Registered):					
Name In Which The Bank Account Is Held					
Banking Institution			Branch		
BSB No	<input type="text"/>	-	<input type="text"/>	Account No	<input type="text"/>
	<input type="text"/>		<input type="text"/>		<input type="text"/>

20) Surname or Registered Name		Given Names		Date of Birth	% Ownership
Address				Post Code	Primary Contact No
email address			SIGNATURE		
Are you a Hobbyist?	<input type="checkbox"/>	Indicate YES or NO	Are you GST Registered?	<input type="checkbox"/>	Indicate YES or NO
ABN Number (if GST Registered):					
Name In Which The Bank Account Is Held					
Banking Institution			Branch		
BSB No	<input type="text"/>	-	<input type="text"/>	Account No	<input type="text"/>
	<input type="text"/>		<input type="text"/>		<input type="text"/>

Independent Witness Signature	Witness Name	Date
Address		Post Code