

PO Box 1034 BANKSTOWN NSW 1885 T 02 9722 6600 F 02 8580 5792

www.hrnsw.com.au

## Application for Bookmaker's Clerk's Licence

							se write in CAPITAL LETTERS ssport size photograph must accompany	this applica	ation	
Mr/N	Mr/Mrs/Ms/Miss Surname				Given N	Vame	es			
Address				Suburb	ı	State	Postcode			
Home Phone			Work Phone				Mobile			
DOB Occupation										
Name and Address of Bookmaker by whom Employed										
Email										
Are you or have you ever been disqualified or suspended from holding a Bookmaker's or Bookmaker's Clerk's Licence?								Yes	No	
2.	If 'Yes' please provide details  Are you the licensed holder or have you ever held a Bookmaker's Licence?								П	
	If 'Yes' please provide details									
3.	3. Have you ever been convicted of any criminal offence within the last 10 years?									
If 'Yes' please provide details										
4.	Have you ever been refused a licence by any Controlling Body of Harness Racing, Horse Racing, or Greyhound Racing in any State, Territory or Country?									
If 'Yes' please provide details										
5.	Have you ever been disqualified or suspended by and Controlling Body of Harness Racing, Horse Racing, Greyhound Racing in any State, Territory or Country?									
If 'Yes' please provide details										
If Holder of a Licence before please state Type of Licence Held							Season Last Held	son Last Held		
I hereby apply to be entered on the register of Bookmaker's Clerk's of Harness Racing New South Wales as a Bookmaker's Clerk licensed to exercise my vocation as such in N.S.W.										
I make this application pursuant to the Rules of Harness Racing for the State of New South Wales, and I acknowledge that I herby become pursuant to and bound by the said Rules of Harness Racing and the acts and decisions of Harness Racing New South Wales and all persons authorised by the said Rules of Harness Racing to act and give decisions, and I undertake and agree to observe and comply with the said Rules of Harness Racing and such acts and decisions. I declare the above particulars to be true to the best of my knowledge and belief. I hereby authorise the New South Wales Commissioner of Police to make available to Harness Racing New South Wales details of any convictions and information relating to me.										
Sign	Signature of Applicant (signature must be witnessed)  Date									
Signature of Witness Name of Witness			Name of Witness		Date					
Office Use Only										
Licence No:										

R/N:

Date of Issue: