

FEE
\$15.00
Includes GST

**APPLICATION FOR DUPLICATE
NAMING FORM**



I

Of

In the state of South Australia, do solemnly and sincerely declare as follows:-
Being the registered Owner/Trainer wish to apply for a duplicate Naming Form for

The Unnamed Greyhound X.....

Earbrand/ Litter Number L..... Puppy Number

Colour Sex

Which has been:-

- 1. Lost
- 2. Destroyed
(Please cross out which is not applicable)

I have made every effort to locate the certificate of the above mentioned Greyhound and if recovered shall return same to Greyhound Racing SA's office.

I am not at present the subject of any disqualification, suspension imposed by any Club or Controlling Authority in Australia and New Zealand, nor the subject of any enquiry.

Signed:

Subscribed and declared at

In the State of South Australia on this:-

..... day of 20.....

Before Me.....

(Justice of the Peace)

PAYMENT BY CREDIT CARD –

If you would like to pay by credit card (Bankcard, Mastercard or Visa only) please complete the following details

Card Number [] [] [] [] - [] [] [] [] - [] [] [] [] - [] [] [] [] Expiry Date [] [] / [] []

Card Holder's Name _____ Signature _____