R 114-A

APPLICATION TO REGISTER A SYNDICATE

We hereby make application to register a Syndicate under the Rules of Harness Racing. Should such registration be granted the Syndicate agrees to be bound by the Rules of Harness Racing and all determinations made by the Controlling Body.

The Syndicate names requested in order of preference are:-

1. _____

2. _____

3. _____

The Syndicate hereby nominates _____

of _____

as its Syndicate Manager and authorises the said Manager to act on its behalf in relation to any requirement of the Controlling Body with respect to the horses owned or leased by the Syndicate and without limiting the generality of the foregoing to:

(i) act on behalf of the Syndicate in all matters relating to the ownership, leasing, registration, racing and breeding of any horse;
(ii) enter or nominate and/or withdraw in accordance with the rules any horse registered on behalf of the Syndicate;
(iii) to accept any prizemoney or trophies on behalf of the Syndicate;
(iv) to execute on behalf of the Syndicate registration or other documents required by the Controlling Body.

The members of the Syndicate hereby authorise the Controlling Body to deal with the Manager with respect to any matter whatsoever arising out of the ownership or lease of any horse by the Syndicate.

Every change in the membership of this Syndicate (including the death of any member) will be notified within seven (7) days.

Bank Branch No _____ **Branch (NAB, Westpac etc)** _____
Account No _____ **Account Name** _____
I agree that stake monies for the above horse be paid into the above bank account.

Signature of Syndicate Manager: _____

Date:___/___/___

Please complete section overleaf

Office Use Only	Name of Syndicate	Lodged	Approved

(note r.299)

HARNESS RACING SA LTD
ABN 68 094 559 930
PO Box 1112, GAWLER SA 5112
Phone: (08) 8285 0700
Email: saharness@saharness.org.au Website: www.satrots.com.au

MEMBERS OF SYNDICATE

(The signatories to this application hereby authorise the appointed Racing Manager to execute registration documents on behalf of the Syndicate).

Use Block Letters

There are _____ members of this Syndicate.

Surname	First Name	Second Name	Date of Birth	Residential Address of Each Member	Post code	Phone No.	Occupation	Signatures
Mr/Mrs/Miss/Ms								
Mr/Mrs/Miss/Ms								
Mr/Mrs/Miss/Ms								
Mr/Mrs/Miss/Ms								
Mr/Mrs/Miss/Mx								
Mr/Mrs/Miss/Ms								
Mr/Mrs/Miss/Ms								
Mr/Mrs/Miss/Ms								
Mr/Mrs/Miss/Ms								
Mr/Mrs/Miss/Ms								
Mr/Mrs/Miss/Ms								
Mr/Mrs/Miss/Ms								
Mr/Mrs/Miss/Ms								
Mr/Mrs/Miss/Ms								
Mr/Mrs/Miss/Ms								
Mr/Mrs/Miss/Ms								