

## APPLICATION FOR REGISTRATION OF A STABLEHAND

Licence fee \$40. (HRNZ Youth Subsidy - under 31yrs free) Email admin@hrnz.co.nz

I hereby apply in conformity with the harness racing stable.	e New Zealand Rules of Harne	ss Racing for a licence	e authorising me to be employed in a
Title (Mrs, Ms, Miss etc)	Name in Full		
Is applicant currently enrolled in a cadet	scheme?		
Is it applicant's intention to enter into a c	adetship agreement?		
State if licensed before	If so, when?	С	Date of birth
Total time spent in the harness racing ind	ustry		OFFICE HEE ONLY
Name of present employer			OFFICE USE ONLY
How long has applicant been with presen	t employer?		
Has applicant ever been refused a licence or by any other Racing or Harness Racing	under the NZ Rules of Harness Ra Authority?	acing, 	
Has applicant ever been disqualified or su	spended? If so, when?		
Have you ever appeared before the Law (	Courts and been convicted of any	offence?	
If so, give place, date and details			
Are you suffering from any physical disab	ility, including eye deficiency?		
in the Forms Section on the HRNZ websit Harness Racing Privacy - Your personal inform & Regulations of HRNZ. Your information is he Board Members, office holders and employees your personal details. We publish the title, nar shares published information with agencies wl will only disclose to agencies outside of New Z to be shared with third parties, please update Driver Licence Holders  (1) I hereby give consent to a sample being of (2) Declare that I am using an approved safety	the Health & Safety Notice dated Jure. ation is collected to process your applied physically at HRNZ Inc, 114 Wrights of HRNZ. You have the right to requence initials, and last name of horse own are involved in the Harness Racing ealand if we are satisfied that there are your privacy settings by editing your potained from me pursuant to Rule 31: y helmet and an approved safety vest	ication, for HRNZ's purpose Road, Christchurch, and ele st access to your personal in ners on our website (www.landustry (including clubs) the e comparable privacy safegorofile on your My HRNZ logorofile.	nat are approved by us to receive such data. We guards. If you do not wish for your information gin or contact HRNZ.
SIGNATURE OF APPLICANT	Occ	cupation	
Residential Address			
Postal Address			
Phone: Home	Business		Mobile
Email			
EMPLOYER'S ENDORSEM	ENT AND DECLARAT	ION	
I,			
<ul> <li>that</li></ul>	per person to hold a licence unde	r the Rules of Harness F	

SIGNATURE OF EMPLOYER ------

## **DRIVER SAFETY POLICY**

I hereby acknowledge that in continuing to drive I understand the HRNZ DRIVER SAFETY POLICY: PRE-EXISTING MEDICAL CONDITION AND PREGNANCY and, agree that:

- if I have a pre-existing medical condition which exposes me to an increased risk of damage/loss as a result of an accident or injury, then I must obtain clearance from a medical officer before driving;
- if I am pregnant, I am aware that any accident could injure my unborn child or children and that I must obtain clearance from a medical officer before driving; and
- I take full responsibility for any adverse consequences that may occur at any time during participation in racing and I will not pursue any legal action against any other driver, Harness Racing Club or Harness Racing New Zealand Inc. should there be any injury or accident.

## **HRNZ YOUTH SUBSIDY**

The Youth Development Fund provides a subsidy for Licence Fees for those who are under 31 years of age and no fee is required (Age as at 1 August). Terms and conditions apply to this subsidy.

PAYMENT DETAILS				
1. I have paid by bank deposit Amount paid \$	Date deposited			
Harness Racing NZ bank account no. 030802 0338257 00 (Please use your name, customer no. & "licence" as a reference)				
Please charge my Mastercard Visa V				
Payment amount \$				
Card number	Expiry date			
Cardholder name	Cardholder signature			