

Application to Register up to 6 Racing Greyhounds

Local Law No. 2 (Animal Management) 2011 and Animal Management (Cats and Dogs) Act 2008

IMPORTANT INFORMATION

- It is mandatory for dogs 12 weeks and over to be registered with Council.
- Racing Greyhounds must also be registered with Racing Queensland.
- No more than six (6) Racing Greyhounds are allowed to be kept on any property, unless a permit to do so has been approved.
- An application form to keep more than six (6) Racing Greyhounds can be found on Council's website.
- Racing Greyhounds must be muzzled in a public place as per Greyhound Racing Queensland regulations.
- Animal registration renewal fees apply – refer to the Fees & Charges schedule.
- Dogs must comply with Council's requirements for desexing (animal/s must be desexed within 28 days of registration), unless exemption exists.
- Being a member of a breeder association is not an exemption for desexing. An application for annual breeder approval must be sought.

Note: animals registered for the first time only, in the Fraser Coast Region, will be registered free of charge for the current registration period only.

ADDRESS WHERE ANIMAL KEPT

Office use only – Prop No:

Street Address, Suburb & Postcode

How many existing Racing Greyhounds on the property

APPLICANT DETAILS/NEW OWNER DETAILS (must be 18 years or over)

Office use only – Name No:

New Registration Yes No Foster Carer Yes No

Currently Registered/
Change of Ownership Yes No Returning to Region/
Reactivation of Registration Yes No

Title Given Name/s

DOB / / Surname

Email

Postal Address (or as above)

Phone M: H: W:

Would you like to receive your Animal notices via email Yes No

Racing Queensland Membership Number

ALTERNATE CONTACT DETAILS

Office use only – Name No:

Title Mr Mrs Ms Miss Date of Birth (if known)

Surname Given Name/s

Residential Address

Email

Phone M: H: W:

HELP ME – I'M LOST

Would you like Council to release your contact information if your animal is found? Only boxes marked below will be released.

Owner Name Address Home/Work Ph Mobile Phone Email Animal Name

GREYHOUND DETAILS #1 <i>*Complete sections as relevant</i>		Animal No:	
		Tag No:	
Animal Name			
Racing Name			
Date of Birth/Age			
Microchip Number			
Colour/s			
Gender	<input type="checkbox"/> M / <input type="checkbox"/> F	Desexed <i>(if no – refer exemptions)</i>	<input type="checkbox"/> Y / <input type="checkbox"/> N

GREYHOUND DETAILS #2 <i>*Complete sections as relevant</i>		Animal No:	
		Tag No:	
Animal Name			
Racing Name			
Date of Birth/Age			
Microchip Number			
Colour/s			
Gender	<input type="checkbox"/> M / <input type="checkbox"/> F	Desexed <i>(if no – refer exemptions)</i>	<input type="checkbox"/> Y / <input type="checkbox"/> N

GREYHOUND DETAILS #3 <i>*Complete sections as relevant</i>		Animal No:	
		Tag No:	
Animal Name			
Racing Name			
Date of Birth/Age			
Microchip Number			
Colour/s			
Gender	<input type="checkbox"/> M / <input type="checkbox"/> F	Desexed <i>(if no – refer exemptions)</i>	<input type="checkbox"/> Y / <input type="checkbox"/> N

GREYHOUND DETAILS #4 <i>*Complete sections as relevant</i>		Animal No:	
		Tag No:	
Animal Name			
Racing Name			
Date of Birth/Age			
Microchip Number			
Colour/s			
Gender	<input type="checkbox"/> M / <input type="checkbox"/> F	Desexed <i>(if no – refer exemptions)</i>	<input type="checkbox"/> Y / <input type="checkbox"/> N

GREYHOUND DETAILS #5 <i>*Complete sections as relevant</i>		Animal No:	
		Tag No:	
Animal Name			
Racing Name			
Date of Birth/Age			
Microchip Number			
Colour/s			
Gender	<input type="checkbox"/> M / <input type="checkbox"/> F	Desexed <i>(if no – refer exemptions)</i>	<input type="checkbox"/> Y / <input type="checkbox"/> N

GREYHOUND DETAILS #6 <i>*Complete sections as relevant</i>		Animal No:	
		Tag No:	
Animal Name			
Racing Name			
Date of Birth/Age			
Microchip Number			
Colour/s			
Gender	<input type="checkbox"/> M / <input type="checkbox"/> F	Desexed <i>(if no – refer exemptions)</i>	<input type="checkbox"/> Y / <input type="checkbox"/> N

DELAYED DESEXING (proof required) Relevant fee will be applied in accordance with status of dog at time of registration renewal.	
Desexing Voucher/Letter	<input type="checkbox"/> Y <input type="checkbox"/> N
Date Booked In:	
Vet Surgery:	

DESEXING EXEMPTION/S (proof required) Relevant fee will be applied in accordance with status of dog at time of registration renewal.	
Vet Certificate/Letter <i>*Unable to be desexed for medical reasons</i>	<input type="checkbox"/> Y <input type="checkbox"/> N
8Yrs or over; or	<input type="checkbox"/> Y <input type="checkbox"/> N
Show Assoc. <i>(Evidence required)</i>	<input type="checkbox"/> Y <input type="checkbox"/> N

Declaration	
<input type="checkbox"/>	I declare that I have answered all questions truthfully and that all the information I have provided is accurate. I acknowledge that it is an offence under section 204 of the <i>Animal Management (Cats and Dogs) Act 2008</i> to provide false or misleading information.
<input type="checkbox"/>	By ticking this box, I understand that if my animal is whole and/or not microchipped, and I am not claiming for an exemption and have not provided a pre-paid desexing voucher, I declare that I will provide a desexing certificate and/or microchipping information to Council within 28 days of registration, or fines may apply.
Applicant Signature:	Date:

Office Use Only		
Date Created:	CSO Initials:	<input type="checkbox"/> Declaration consent section signed
<input type="checkbox"/> Available to the public memo completed	<input type="checkbox"/> Desexing memo (where required) (<i>exemption OR delayed</i>)	
<input type="checkbox"/> Owners' details verified – (Licence/Credit/Pension Card)	<input type="checkbox"/> Registration Certificate, TAG, and Factsheet Issued	