# GREYHOUND RECOVERY REBATE SCHEME - APPLICATION FORM

**The Application Process**

**Greyhound Responsible Person**: Complete sections A and E of the application form below.

**Attending Steward**\*\*: Complete section B of the application form below.

**On-track Veterinarian** (If present): Complete section C of the application form below.

**Off-track Veterinarian**: Complete section D of the application form below.

**Tasracing**: Will need to confirm eligibility and sign Section F to confirm injury is covered under the Greyhound Recovery Rebate policy as per GRRS policy and that Tasracing will reimburse cost up to limits of the policy. <https://tasracingcorporate.com.au/wp-content/uploads/2023/09/Greyhound-Recovery-Rebate-Policy.pdf>

*\*\*In the case where a Steward is not present (e.g. trial sessions), a club official attending the trial session is required to complete Section B of the application.*

# Eligible Injury

An eligible injury that is sustained during a race meeting, qualifying trial or official club trial at which club officials are present.

Eligible injuries or medical conditions are:

* any bone fracture except a single metacarpal or metatarsal fracture, a toe (phalangeal and/or sesamoid) fracture or a tail fracture; or
* any **joint dislocation above and including the wrist or hock**, (therefore does not include metacarpal-phalangeal or metatarsal-phalangeal dislocation, toe dislocation, or tail dislocation); or • a complete Achilles tendon rupture; or
* any other severe injury or medical condition where on-track euthanasia may otherwise be considered appropriate

# Supporting Documentation Required

Itemised invoices and receipts for all veterinary work undertaken – clearly indicating the name and/or earbrand of the greyhound - must be submitted along with this application form.

If direct payment of account by Tasracing is required, the tax invoice for the services provided **must**

be in the name of Tasracing.

**Section A: *Greyhound Responsible Person to Complete***

### Applicant details

Name:

Address:

Email:

Phone:

Licence number:

### Greyhound details

Name:

Ear brand:

Microchip:

Gender:

Date of birth:

## Section B: Attending Steward/Trial Official to Complete

### Incident details

Date:

Racetrack:

Race number or Trial Details (e.g. 461 Box trial):

I confirm that the greyhound was reported to have suffered an injury during the course of this race meeting/Trial session: ꙱

Steward/Trial Official name:

Signature:

## Section C: On-track Veterinarian to Complete (If OTV present)

### Injury details

Initial assessment:

Treatment provided:

### Practice details

Name: Address: Email: Phone:

### Practitioner details

Name: Signature:

[ ]  I have assessed the injury against the GRRS policy: <https://tasracingcorporate.com.au/wp-content/uploads/2023/09/Greyhound-Recovery-Rebate-Policy.pdf>

**Section D: *Off-track Veterinarian to Complete***

### Injury details

Date of examination: Diagnosis:

Treatment provided:

Rehabilitation plan:

Radiographs and X-Rays to be supplied to Tasracing: welfare@tasracing.com.au [ ]  Sent

(Tasracing required this diagnostic information to determine if an application is eligible for the Greyhound Recovery Rebate Scheme. If not eligible, all veterinary costs incurred are the responsibility of the owner of the Greyhound)

### Practice details

Name: Address: Email: Phone:

### Practitioner details

Name: Signature:

**Section E: *Greyhound Owner to Complete***

### Declaration

I have read and understand the Greyhound Recovery Rebate Scheme policy: ꙱

The information that I have provided in this application is true and correct: ꙱

I have attached all required supporting documentation: ꙱

I understand and acknowledge that I am responsible for meeting all costs of treatment for ꙱

 this injury unless and until Tasracing provides their approval in writing (in Section F below) and that

 this injury has been determined to be eligible under the Greyhound Recovery Rebate Scheme:

Name: Signature:

Date:

***Application forms and supporting documentation may be submitted to Tasracing by email or post via the contact details provided below.***

***Greyhound Recovery Rebate Scheme PO Box 730***

***GLENORCHY TAS 7010***

***Email:*** ***welfare@tasracing.com.au***

 ***Phone – 6212 9333***

**Section F**

Tasracing Representative to complete: Approved [ ]  Not Approved [ ]

Reason not approved: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name: Signature:

Date: