

# GREYHOUND CARE SCHEME

## FORM 1: APPLICATION



### TO BE COMPLETED BY THE ON-TRACK VETERINARIAN

GREYHOUND NAME:			
MICROCHIP #	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
INJURY DATE:			
NAME OF OTV:			
INJURY TYPE			
Medication:	Amount	Route	Time

### TO BE COMPLETED BY THE OWNER/TRAINER/AUTHORISED AGENT

FULL NAME:	
GWIC LICENCE #:	
MOBILE:	
EMAIL:	
<p>I am the OWNER, TRAINER, AUTHORISED AGENT of the above described greyhound.</p> <p>By entering this Greyhound Care Scheme program, I agree to retire this greyhound from racing and breeding.</p> <p>I consent to release my details and patient records to relevant third-parties participating in the Greyhound Care Scheme, including Greyhound Racing NSW, Greyhounds As Pets NSW, NSW Greyhound Welfare and Integrity Commission and treating and referral veterinarians.</p> <p>I have read and understand and agree to be bound by the terms and conditions (on reverse of this form). I will advise GRNSW if there is any change in the particulars in this application.</p> <p><input type="checkbox"/> I do not authorise the transport of the greyhound by the Track Ambulance to the Veterinary Practice participating in the GRNSW Greyhound Care Scheme.</p>	
SIGNATURE	DATE

TRACK MANAGER TO EMAIL PHOTO OF THIS APPLICATION TO [vets@grnsw.com.au](mailto:vets@grnsw.com.au) | text: 0419 934 015

## TERMS AND CONDITIONS

1. The greyhound must be eligible for the Greyhound Care Scheme (GCS). Eligibility requirement can be found at [www.greyhoundcarescheme.com.au](http://www.greyhoundcarescheme.com.au)
2. The injured greyhound must be seen by a registered veterinary practitioner, excluding the OTV, within 24 hours of the injury.
3. GRNSW is not responsible for arranging the veterinary treatments or rehabilitation care.
4. Any other veterinary treatments/repairs (excluding triage) above financial caps set out in the Policy, must be approved by GRNSW. Otherwise, the Participant is responsible for payment
5. The Participant is responsible for providing consent for all veterinary treatment, to the treating veterinarian.
6. The Participant is responsible for treatment costs above the financial limits unless prior approval has been granted by GRNSW.
7. GRNSW is not liable for surgical or rehabilitation complication. If a complication occurs a new GCS application will need to be submitted.
8. Veterinary invoices must be issued in the name of the Participant applying under the Scheme and must include such particulars as GRNSW may require.
9. GRNSW will supply Track Ambulance Transport from the track to the preferred treating Veterinary Hospital. The participant may choose to transport the Greyhound themselves.
10. Ambulance transport is not provided by a vehicle equipped to provide emergency care.
11. GRNSW is not liable for complications during transportation or arising from transportation.
12. The Participant is responsible for the collection of the greyhound from the treating veterinarian on the direction of the veterinarian. The Participant is liable for all hospital costs beyond that directed by the treating veterinarian.
13. Invoices seeking payment must be presented to GRNSW within 60 days of the date of the invoice.
14. Post-operative care subsidies are only approved for payment upon receipt of Notification of Retirement to GWIC.
15. Incomplete applications and applications without the required supporting documentation will not be processed.
16. GRNSW reserves the right to amend this Policy at any time.

POLICY IS READABLE AT:

