

Application for Approval of Person: Close Associate of a Licensed Racing Club or Industry Controlling Body

Where to lodge this form

By email to:

Email documents to:
liquorandgaming@sa.gov.au

By mail to:

Licensing and Registration
GPO Box 2169
ADELAIDE SA 5001

In person at:

Customer Service Centre
91 Grenfell Street
ADELAIDE SA 5000

More information

www.cbs.sa.gov.au

Ph: 08 8226 8655

Person authorised to act on behalf of the racing club / industry controlling authority

Contact name _____ Position: _____
Daytime phone _____ Email _____
Signature _____ Date _____

Racing club / Industry controlling authority

- ☐ Harness Racing South Australia
- ☐ Thoroughbred Racing South Australia
- ☐ Greyhound Racing South Australia
- ☐ South Australian Jockey Club
- ☐ South Australian Harness Racing Club

Proposed close associate

Family name _____ Other names _____

Please note:

- A Personal Information Declaration (PID) form is to be completed by the proposed close associate.
- No fee required