**PROMOTERS: CUSTOMER IDENTIFICATION FORM**

Note: The relevant Lead Regulator prepares its Pro Forma documents to assist Promoters in complying with the requirements of their Australian Financial Services Licence. The Pro Forma is not meant to be exhaustive and the relevant Lead Regulator does not accept liability for the contents of the PROMOTERS IDENTIFICATION FORM which remains the responsibility of the Promoter.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Promoters Name: | | | | | | |
| Particulars of proposed Yearling(s) or Racehorse(s) (If applicable): | | | | | | |
| **PERSONAL DETAILS OF APPLICANT** | | | | | | |
| Last Name: | | First name: | | | Date of Birth: | |
| Residential Address: | | | Post code | | | Period of residency |
| Previous address (If you have resided less than 3 years at current address). | | | | Postal Address (If different) | | |
| Contact Telephone Number | Email Address | | | | | |
| Name, address and telephone of Relative or Friend not residing with you  Name:  Address:  Telephone number | | | | | | |
|  | | | | | | |
| **PROOF OF IDENTITY – Minimum Requirements Individual** | | | | | | |
| **PRIMARY:**  Drivers Licence Passport Details: Proof of Age Card  **SECONDARY:**  Birth Certificate Citizenship Certifi cate Pension Card issued by Centrelink ATO Assessment (current)  State Government Document (current) Local Government Document (current) Utilities Document (current) | | | | | | |

*Promoters: Customer Identification Form*

|  |  |  |  |
| --- | --- | --- | --- |
| **MINIMUM REQUIREMENTS COMPANY** | | | |
| Company Name: | | | Principal Place of Business: |
| ACN/ABN: | | Directors: | |
| **EMPLOYMENT DETAILS** | | | |
| Occupation/Position: | | Employer: | |
| Address of Employer: | | | Telephone contact details: |
| Duration of employment: | Previous employer if less than 3 years: | | |
| If Self Employed advise external source (e.g. Accountant) who can confirm your business | | | |
| **OTHER INFORMATION** | | | |
| Have you ever been listed as a Defaulter in Bets or Warned Off or Disqualified by a Racing, Harness or Greyhound Authority – provide details | | | |

**I certify that:**

1. the above information is true and correct,
2. I agree to all the terms and conditions applicable to this Product Disclosure Statement,

(c) I agree that ownership of a racehorse is governed by the Australian and State Rules of Racing and that I will comply with and be bound by those rules

Signature Date

|  |  |  |  |
| --- | --- | --- | --- |
| **COPY OF IDENTIFICATION DOCUMENTS ATTACHED–YES/NO** | | |  |
| Date Received | Employee Name | | Employee Signature |
| Promoters Approval | | Comments |  |

*Promoters: Customer Identification Form*