

**EMIRATES RACING AUTHORITY**  
**DWCC VISITING EMPLOYEE LICENCE APPLICATION 2016/17**

- Visiting Assistant Trainer Licence Fee AED 500
- Clearance from Home Authority

Email: aimee.grieve@dubairacingclub.com

TYPE OF LICENCE	ASSISTANT TRAINER / TRAVELLING HEAD LAD / TRACKWORK RIDER	
FAMILY NAME	FIRST NAME	
ABBREVIATED NAME FOR ID CARD, IF NEEDED (MAX 15 CHARACTERS)		
TRAINER / EMPLOYER		
ADDRESS		
DATE OF BIRTH	NATIONALITY	
MOBILE	EMAIL	
PERSON TO NOTIFY IN EMERGENCY	MOBILE	

**PLEASE ANSWER THE FOLLOWING QUESTIONS**

1 Have you held an ERA licence previously? If yes, type of licence	Year /s of issue	Yes <input type="checkbox"/>	No <input type="checkbox"/>
2 Racing Authority where currently licensed Type of licence			
3 Are you currently under any disqualification or any other disability imposed by any Racing Authority? If yes, details		Yes <input type="checkbox"/>	No <input type="checkbox"/>
4 Have you ever been refused a licence/or had your licence suspended, disqualified, withdrawn, revoked or cancelled by any Turf Authority? If yes, details			
Please note if the licence was issued by an Authority outside the United Arab Emirates the applicant will require a "clearance certificate" from the Authority, which must be a recognised Authority as listed in Instruction 7 of the Rules of Racing issued by the ERA			

**DECLARATION**

I, the applicant, make the following declarations and acknowledgements in respect of this application.

I declare that the particulars contained in this application are true and correct to the best of my knowledge and belief.

I acknowledge that as a condition of the grant of a licence by Emirates Racing Authority (ERA), I will comply at all times with the ERA Rules of Racing, Instructions and Policies which I have read and understood.

I undertake to advise with the ERA in writing if I become aware of any change to the particulars contained set out in this application.

EMPLOYEE'S SIGNATURE	DATE	
TRAINER'S SIGNATURE	DATE	

**LICENCE FEE PAYMENT**

PAYMENT MODE	Credit Card <input type="checkbox"/>	Cheque <input type="checkbox"/>	Bank Transfer <input type="checkbox"/>	Cash <input type="checkbox"/>	Charge to my Account <input type="checkbox"/> (only applicable if credit balance existing)
AUTHORISED BY					
DATE					

**OFFICE USE ONLY**

Licence Granted	Type	No	Valid Until
SIGNED		DATE	