



Approved Rider Licence Application

NO FEE

Overview of licensing process for approved riders

1) Answer all questions and sign the Approved Rider declaration.

2) Attach the following –

- A recent passport sized photograph of yourself;
- A photocopy of proof of your identity e.g. drivers licence, birth certificate etc; and
- Medical Certificate – **must be completed on the Queensland Racing Integrity Commission Approved Rider Medical form (new medical required to renew licence each season).**

If you are not an Australian citizen proof of your right to work including a copy of your passport e.g. certificate of residence/ photocopy of visa.

- 3) Send your application to the Queensland Racing Integrity Commission (QRIC) office by post or by email licensing@qric.qld.gov.au
- 4) Once your application has been received, QRIC may wish to assess your competency as an Approved rider. If so a Riding Assessment will be undertaken in relation to your ability to ride thoroughbred racehorses as well as your general knowledge of the rules of racing.
- 5) As a licensed Approved Rider you may:
- Ride horses at Queensland Community Racing Scheme; and
 - Continue to hold a stablehand or track rider licence with QRIC.

Submission of this application does not guarantee approval. Applications may be deferred for further investigation, interview or for any other reason at the Queensland Racing Integrity Commissions (QRIC's) discretion.

Should you have any queries in relation to the completion of this form, please contact Licensing on: **1300 087 021**

V1.01 | Reference number **2776**

Refer to the Commission's privacy policy on our website.

Queensland Racing Integrity Commission
ABN: 64 838 583 571
PO Box 15666
CITY EAST QLD 4002

Phone: 1300 087 021
Email: licensing@qric.qld.gov.au
Website: www.qric.qld.gov.au

Office Hours: 8:30am to
4:00pm, Mon-Fri
Closed public holidays



APPLICANT DETAILS

This information is collected for the purposes of enabling QRIC to identify and contact you.

1.	Full Name	
2.	Have you been known by any other name?	
3.	Date and place of birth	
4.	Residential Address	Suburb: Postcode:
5.	Postal Address	Suburb: Postcode:
6.	Home Phone Number	
7.	Mobile Number	
8.	Facsimile Number	
9.	Email address	

Nominated contact person

This information is collected to enable QRIC to contact a person nominated by you in the event of an emergency or in the event that you are unable to look after your own affairs in the event of an accident. Please note if you are under 18 years of age the Nominated Contact Person must be your legal guardian. QRIC may disclose this information to third parties.

10.	Nominated Contact Person	
11.	Persons' relationship to you	
12.	Best Contact Number	

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CONSENT FOR MINORS (UNDER 18 YEARS OF AGE)

I, _____
(Name)

Of _____
(Address)

Being the legal guardian/parent of the applicant _____ (name) hereby consent to him/her being registered with The Queensland Racing Integrity Commission. I understand that the applicant will be subject to the Rules of Thoroughbred Racing.

Signature: _____ Date: _____ DOB: _____

Employment history/ riding experience

QRIC collects this information to determine whether you have had the opportunity to develop skills and to receive practical training in caring for and riding thoroughbred horses. **QRIC may contact any trainers who have engaged your services in the past. This will assist QRIC when determining if you possess the skills to be an Approved Rider.**

13.	Have you previously held a licence with QRIC? If yes please provide details including type of licence held.	Yes <input type="checkbox"/> No <input type="checkbox"/> Details:
14.	Please state names of Trainers with whom you have had previous employment, and when this was.	
15.	Please outline any relevant riding experience- thoroughbred horses, trackwork, jumpouts or general horse and riding skills and experience.	

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Contact with racing control bodies

As part of the licensing process, QRIC will liaise with interstate and overseas Registered Racing Authorities in all codes of racing, to determine whether you have ever been involved in racing in any capacity and your disciplinary history with any bodies that have issued you with a licence.

QRIC will disclose to other control bodies the fact that you have made application to QRIC for a licence and your date of birth and contact details for the purpose of identifying you. By signing this form you agree to QRIC requesting details and history of any licenses current or past relating to this application.

16.	<p>Have you held a licence that was issued by any registered racing authority in Australia or overseas such as:</p> <ul style="list-style-type: none"> • Racing NSW / Racing Victoria Ltd • Harness or Greyhound control bodies • New Zealand Thoroughbred Racing Board <p>If yes please provide and attach details of supporting evidence (including dates).</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Details:</p>
17.	<p>Have you ever had a licence disqualified, revoked, suspended, withdrawn or refused by any Racing Authority?</p> <p>If so with which authority did this occur and when?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Details:</p>

Criminal history

N.B- Sch 3 Racing Integrity Act 2016-“conviction” of an offence means being found guilty of an offence, on a plea of guilty or otherwise, whether or not a conviction is recorded.

A prior criminal history does not prevent a person from obtaining a licence, but any prior convictions are taken into account when deciding whether an applicant is an appropriate person to be involved in thoroughbred racing in Queensland. This information may be disclosed to QRIC personnel **and other government departments and authorities.**

18.	<p>Do you have any prior criminal convictions or charges INCLUDING GUILTY PLEAS WITHOUT CONVICTION in Australia or overseas? If so, please outline the circumstances surrounding your charges or conviction/s.</p> <p>(Please attach additional information to your form should there be insufficient room).</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Details:</p>
19.	<p>Are you currently facing a charge for any offence anywhere in Australia or overseas?</p> <p>If so, please advise the nature of the charge, the Court location and next remand or hearing date.</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Details:</p>

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20.	Have you ever been charged with any offence relating to cruelty to animals in Australia or overseas? If so, please outline the nature of the charge and the outcome of the matter.	Yes <input type="checkbox"/> No <input type="checkbox"/> Details:
21.	Do you understand that if you are charged with an offence under Australian Law that you must notify The Queensland Racing Integrity Commission within 14 days?	Yes <input type="checkbox"/> No <input type="checkbox"/>



Approved Rider Declaration

I, _____
Name of applicant

Of _____
Residential address

Do solemnly and sincerely declare as follows:

1. All information that I have provided to The Queensland Racing Integrity Commission (QRIC) in this application form is true and correct in every particular.
2. I understand that I will not be paid for riding horses in QCRS races and that I am not allowed to receive any fee or reward in money for riding in QCRS races.
3. I understand that I am entitled to be reimbursed for reasonable out of pocket expenses and that the race club holding the QCRS races is responsible for reimbursing me for these expenses.
4. I understand that QRIC will rely upon the information I have provided in this application form for the purpose of determining whether I am an appropriate person to receive an Approved Rider's licence.
5. I understand that QRIC may take disciplinary action against me in the event that the information I have provided in this application is false or misleading in any particular, and that disciplinary action may include the revocation of any licence issued to me.
6. **Privacy and Information:**
 - a. I am aware that QRIC collates personal information relating to me as part of the process of retaining records of all persons licensed by QRIC. I consent to QRIC disclosing and requesting personal information concerning my affairs as a licensee to and from:
 - i. Authorised employees and agents of QRIC;
 - ii. Other State and Federal Government departments and agencies;
 - iii. Principal Racing Authorities in other states and territories in Australia and elsewhere;
 - iv. An owner or licensee of a venue at which betting on thoroughbred races is conducted;
 - v. Racing Information Services Australia, and its integrated divisions;
 - vi. Your public liability insurer and any agent acting on behalf of your insurer;
 - vii. WorkCover and providers of insurance in the racing industry, and
 - viii. I agree to advise QRIC in writing if I do not consent to my name and contact details being published in the Queensland Racing Magazine.
 - b. I understand that any person that provides information to QRIC in compliance with a request made by QRIC does so with my consent and is not breaching the Information Privacy Act 2009 (Qld), Privacy Act 1988 (Cth) or any other legislation concerning the protection of information concerning my personal affairs, in complying with the request by QRIC.
 - c. I understand that personal information of individuals may be collected or disclosed to third parties by The Queensland Racing Integrity Commission in connection with the performance of The Queensland Racing Integrity Commission's functions and powers as per QRIC's Privacy Statement available at <http://www.qric.qld.gov.au/>
7. Information relating to me as part of the licensing process and for the purpose of auditing my performance as a licensed approved rider.
8. I consent to QRIC contacting all licensed totalisator operators and licensed racing bookmakers in Australia, for the purpose of determining whether I am betting on races and I consent to those third parties disclosing information to QRIC about any betting that I engage in.
9. I understand that I must comply with the requirements of the *Racing Integrity Act 2016*, the Rules of Racing and the policies of QRIC when riding in QCRS races and that QRIC may take disciplinary action against me should I fail to abide by the Rules of Racing, policies of QRIC or the *Racing Integrity Act 2016*.

Approved Riders Full Name

Witnesses Full Name

Signature of Approved Rider

Signature of Witness

Date

Date

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Health Assessment Results Form - Approved Rider

Dear Doctor

The Queensland Racing Integrity Commission (QRIC) is the regulator of thoroughbred racing in Queensland. Anyone who rides thoroughbred racehorses must hold a licence issued by QRIC. Prior to issuing or renewing a rider's licence, QRIC requires the rider to be assessed by a general practitioner.

This assessment will assist QRIC to assess the risk to the licensee and others, in the event that a rider's licence is issued or renewed. The second page of this document lists a range of conditions which may be associated with increased risk of employment.

A completed health assessment results form signed by a general practitioner, must be submitted to QRIC to enable consideration to be given to issuing or renewing the rider's licence.

To: QRIC

Given the available medical information provided by the applicant: _____
(Patient name)

I believe that this person:

does not appear to be at *significantly increased risk* of sustaining a work-related condition or aggravating an existing condition in undertaking the nominated role

Or

is at *slightly increased risk* of sustaining a work-related condition or aggravating an existing condition in undertaking the nominated role

Or

is at *moderately to markedly increased risk* of sustaining a work-related condition or aggravating an existing condition in undertaking the nominated role for the following reasons:

Or

demonstrates an absolute medical contraindication to participation as a rider for the following reasons:

Is there any additional inquiry/investigation/ examination you recommend be undertaken to assess the effective functioning of the licensee in his/her role as a rider?

The licensee has disclosed to me that they are currently taking the following medication / supplements:
(please list)

Doctor's Name: Qualifications:

Address:

Signature: Date:/...../.....

V1.01 Reference number 2776	Refer to the Commission's privacy policy on our website.	
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List of conditions which may be associated with increased risk in employment or prevent effective functioning in the role of an Approved Rider.

This 'List of Conditions' is only intended to be used by the applicant and assessing medical practitioner as a guide. It is not intended to be a complete or exhaustive list of conditions or characteristics which can affect the risk or effectiveness in undertaking the nominated role.

- Any condition which can result in dizziness and/or unsteadiness or uncontrolled loss of stability including:
 - A history of epilepsy;
 - A history of cerebrovascular disease;
 - Any condition which can affect level of consciousness;
 - Other relevant neurological disorder;
 - Any condition which can affect co-ordination or reaction time;
 - A history of coronary artery disease;
 - A history of diabetes where the level of control is insufficient to protect against uncontrolled loss of stability: and/or
 - A significant non-correctable visual defect or hearing defect.
- A skin condition adversely affected by heat, humidity or exposure to ultraviolet light.
- Any musculoskeletal condition which could be adversely affected by significant physical exertion and use of physical force.
- Any condition which would affect standing tolerance, walking tolerance, sitting tolerance.
- Any condition which affects strength/range of movement of arms or legs.
- Any condition which affects hand grip.
- A respiratory disease associated with shortness of breath or exertion.
- Any emotional or psychiatric disorder which could lead to impulsiveness or impaired judgment.
- Any condition which affects alertness and concentration.
- Any medication which significantly alters physical functioning and mental acuity and judgment.
- A history of substance abuse.
- Any condition or characteristic which would prevent the wearing of protective clothing e.g. helmets, gloves, body protection devices, footwear, and long-sleeved shirts and trousers.

Assessing risk in placement at work

- '**Risk**' is an expression of the probability of an undesired event and the likely seriousness of the consequences, if any, which might arise from that event.
- '**Increased Risk**' is the extent to which a known circumstance or activity alters the risk for a particular individual compared with a person who does not have the same condition or characteristic.
- The scale below provides means through which a measure of 'Increased Risk' for a particular individual in a given situation can be provided. The scale should be interpreted as follows:

Slightly Increased Risk means that the likelihood of injury or aggravation is possible rather than probable but the likely consequences would not be serious.

- Slightly to Moderately Increased Risk means that injury or aggravation is more likely, but still possible rather than probable and the likely consequences would not be serious.
- Moderately Increased Risk means that, at this point, the likelihood of injury or aggravation changes from being possible to being probable and the likely consequences, if they occur, are likely to result in significant temporary dysfunction
- Moderately to Markedly Increased Risk means that the likelihood of injury or aggravation is clearly probable and the consequences are likely to result in significant temporary dysfunction or some level of permanent disability and could have a significant impact on the employee's ability to perform their role
- Markedly Increased Risk means that the likelihood of injury or aggravation is assessed as being highly probable and the likely consequences will be serious enough to have a permanent impact on the employee's ability to perform their role.

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