

Euthanasia of greyhound veterinary certification



A greyhound owner or custodian who presents a greyhound to a veterinary practitioner for euthanasia due to injury or illness or following its assessment as unsuitable for rehoming, declared a dangerous/menacing dog or has attacked/bitten a person as permitted under the Rehoming Policy must have the euthanasia certified by the veterinary practitioner as provided for in this form.

This form is issued under clause 10 of the Greyhound Racing Regulation 2019 which requires a greyhound racing industry participant to notify GWIC of specified information relating to greyhounds.

This form must be lodged with 2 days from the date that a greyhound is euthanased.

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State:	Postcode:
	Date (dd/mm/yyyy):
	Sex (male or female):
	_ GWIC ear tattoo:
Colour:	
	State:



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Veterinarian practioner to complete		
in quality of life, such that is inhumane or would otherwise con Please ensure proof of medical attention is provided with this form. Declared dangerous/menacing dog Where the greyhound must be euthanased to comply with a commenancing dog under section 34 of the Companion Animals declaration is provided with this form. Known risk to people Where a registered greyhound has attacked or bitten a person behavioural exception may not apply if the greyhound has been person, who is approved by GWIC to temperament assess greyhound's behaviour is consistent with a risk of aggression to rehome and recommends euthanasia. Please ensure the Temperament assessment to determine sure of the person and recommends euthanasia. Please ensure the Temperament assessment to determine sure of the person and recommends euthanasia.	court order, or the greyhound has been declared a dangerous or Act 1998. Please ensure the court order/dangerous dog In causing injury requiring medical attention. The serious een teased, abused or assaulted at the time. Itability to be rehomed as a pet The nent assessment by a registered veterinary practitioner or other eyhounds for rehoming suitability, which has concluded the owards people or other animals that makes it unsuitable to	
Please provide detail, include date of euthanasia:		
Veterinary hospital:	Registration number:	
First name:	Surname:	
Signature:	Date (dd/mm/yyyy):	



Email: registration@gwic.nsw.gov.au



In person: Level 1, 230 Howick Street, Bathurst, NSW



By post: PO Box 178, Bathurst, NSW, 2795

If assistance is required with this application, please contact our Registration Team on 13 49 42 (13 GWIC)