

Special Authority Request Form

OWNER / TRAINERS DETAILS	
Surname:	
Forename(s):	
Address:	
Telephone Number:	

ASSISTANTS DETAILS 1		ASSISTANTS DETAILS 2		ASSISTANTS DETAILS 3	
Surname:		Surname:		Surname:	
Forename(s):		Forename(s):		Forename(s):	
Address:		Address:		Address:	
Telephone Number		Telephone Number		Telephone Number	

In making this application it is understood that I / we the above have read the Rules of Racing of the GBGB and amendments thereto published in the GBGB calendar and GBGB website and agree to abide by them. Greyhounds which have trialled or raced in UK under Special Authority will not be accepted for Trials or Racing in Ireland unless the ID cards for the greyhounds in question have been submitted to the Regulation Dept. of the GRI for authentication and the UK Trial/Race Formlines have been added to the GRI's Race Management System.

GREYHOUND(S) AND EVENT	
To train and manage the greyhound(s)	

Whilst competing in the (name of race)

--

Date of the trial (s)	Date of the Round 1	Date of Final

Stadium Name

--

Name of GBGB Licenced Trainer where greyhound can be inspected

--

Signature of Owner / Trainer requesting Authority _____

You must complete and sign this form and the Journey Plan (Page 2) and return it by emailing to helena.hanrahan@igb.ie or by post to the Regulation Department, Rásáiocht Con Éireann, Greenpark, Dock Road, Limerick V94 Y17X **at least five working days prior to the race or trial in Great Britain.**

Special Authority Application - Journey Plan Form for Owners and Trainers

Owners and Trainers are advised that all overseas travel should only be undertaken under government guidelines published at www.gov.ie/en/campaigns/75d92-covid-19-travel-advice/ and owners and trainers are required to set out their plans to adhere to this advice in advance of a Special Authority being submitted to GBGB on their behalf.

Journey Plan – Travelling with greyhound(s) – Trial Week 1:

Owner/Trainer: _____
Authorised Kennelhand: _____ Contact No.: _____
Authorised Kennelhand: _____ Contact No.: _____

Journey Plan – Travelling with greyhound(s) – Trial Week 2:

Owner/Trainer: _____
Authorised Kennelhand: _____ Contact No.: _____
Authorised Kennelhand: _____ Contact No.: _____

Journey Plan – Travelling with greyhound(s) – Week 1:

Owner/Trainer: _____
Authorised Kennelhand: _____ Contact No.: _____
Authorised Kennelhand: _____ Contact No.: _____

Journey Plan – Travelling with greyhound(s) – Week 2:

Owner/Trainer: _____
Authorised Kennelhand: _____ Contact No.: _____
Authorised Kennelhand: _____ Contact No.: _____

Journey Plan – Travelling with greyhound(s) – Week 3:

Owner/Trainer: _____
Authorised Kennelhand: _____ Contact No.: _____
Authorised Kennelhand: _____ Contact No.: _____

Journey Plan – Travelling with greyhound(s) – Week 4:

Owner/Trainer: _____
Authorised Kennelhand: _____ Contact No.: _____
Authorised Kennelhand: _____ Contact No.: _____

Journey Plan – Travelling with greyhound(s) – Week 5:

Owner/Trainer: _____
Authorised Kennelhand: _____ Contact No.: _____
Authorised Kennelhand: _____ Contact No.: _____

Journey Plan – Travelling with greyhound(s) – Week 6:

Owner/Trainer: _____
Authorised Kennelhand: _____ Contact No.: _____
Authorised Kennelhand: _____ Contact No.: _____

Signature of Owner/Trainer requesting Special Authority: _____
Date: _____