



C16: 12-04

APPLICATION FOR A GRANT FROM THE GENERAL TRUST FUND

This form should be completed on occasions of work related accidents or serious illness or misadventure outside of work related duties by current Licensees of New Zealand Thoroughbred Racing:

- Licensed Jockeys and Apprentice Jockeys; or
Licensed Trainers; or
Licensed Stablehands
Employers of Apprentices and Stablehands

I, apply to the General Trustees for a grant in respect of :

Loss of earnings during first week of incapacity in connection with the accident which happened to me/my employee (delete where not appropriate).

Financial Hardship grant where I will be incapacitated for a period of more than six months of \$..... for the following;

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.....

Place where incident occurred or where serious illness was diagnosed (if applicable)

.....

Date of incident or when the serious illness was diagnosed (if applicable)

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Brief details of the incident or illness

.....
.....

Signed:

Address:

Bank Account:

Date:

Checklist:

NZTR authorised person sign off

Medical Certificate attached?

Any payment made by the Trustees from the General Trust Fund does not represent any admission of liability of the General Trust Fund, NZTR and/or the NZTR member clubs (including any of the agents or employees of NZTR or such clubs). By accepting a payment, the licensee agrees that the payment made by the Trustees on behalf of the General Trust Fund, NZTR and/or the NZTR member clubs (including any of the agents or employees of NZTR or such clubs), is in full and final settlement of any and all of the licensee's rights against the General Trust Fund, NZTR and the NZTR member clubs (including any of the agents or employees of NZTR or such clubs) in relation to the matter in question.