



# The NSW Greyhound Breeders, Owners & Trainers' Association

## APPLICATION FOR MEMBERSHIP

Registered Office:  
Suite 3, Level 2  
Wentworth Park Sporting Complex  
Wentworth Park Road,  
Glebe 2037  
All Correspondence to:  
PO BOX 485  
Glebe 2037

ACN 000 043 756  
ABN 68 000 043 756

Telephone: (02) 9649 7166  
Facsimile: (02) 9649 7440  
Email: gbota@gbota.com.au

To the Directors,

I hereby make application for membership of the NSW Greyhound Breeders, Owners & Trainers' Association.

### APPLICANT'S DETAILS (To be printed in Block Letters)

Surname: .....

Given Names: .....

Residential Address: .....

..... Post Code .....

Telephone ..... Date of Birth..... GRA Registration.....

Please indicate your involvement in the sport - Breeder, Owners, Trainer or Attendant? .....

Have you previously been, or are you currently a member of any Club or Association involved in greyhound racing?

NO / YES (delete which is not applicable) If YES give details:.....

**If my Application is accepted, I agree to be bound by the Articles of Association of the NSW Greyhound Breeders, Owners & Trainers' Association and the decisions of the officials and Directors of that Association.**

Signature of Applicant ..... Date of Application .....

Signature of Nominator ..... Print Name .....

Signature of Secunder ..... Print Name .....

**Nominator and secunder must be financial members and ensure all details are completed. Incomplete applications will not be accepted. False details will invalidate membership.**

### MEMBERSHIP RECOMMENDATION REPORT

This is to certify that the Branch Committee has checked with the Applicant as to the information contained in this Application Form and that the Applicant has fulfilled the attendance requirements of the Articles and attended the Branch meetings on :

...../...../.....      ...../...../.....      ...../...../.....

Upon the Applicant being accepted by the Branch, the Application is to be forwarded to Directors for their consideration, approval and acceptance as a member of the NSW GBOTA.

Signature of Branch Officials: .....

Branch Position held: .....

Submitted to Branch Meeting on: ...../...../.....      Sent to Head Office on:...../...../.....

Secretary's Signature: ..... **BRANCH** .....

If the Applicant desires to be placed on the DIRECT LIST, Secretary to forward this Application directly to the Head Office of the Association giving reasons.

Approved at Directors' Meeting on: .....