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APPLICATION FOR MEMBERSHIP APPLICANT'S DETAILS

(To be printed in Block Letters)

Surname: Given Names:.....
Residential Address:
Suburb:..... Post Code Date of Birth:
Phone: Mobile: Email:

Full Member:	Applicant must be licenced as a Breeder, Owner, Trainer or Attendant with the Controlling Body, and must have attended three (3) Branch Meetings prior to application for membership.
Associate Member:	Any person interested in the greyhound industry and who supports the objects of the Association.

I would like to apply to be:

A Full member

An Associate member

If my Application is accepted, I agree to support the objects of the Association and to be bound by the Constitution of the NSW Greyhound Breeders, Owners & Trainers' Association and any District and/or Branch Governance Framework duly adopted. I further agree to be bound by the Code of Conduct applicable to members and any decision of Officials and Directors of the Association.

Signature of Applicant Date of Application

Signature of Nominator Print Name

Signature of Seconder Print Name

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

FULL MEMBER APPLICATIONS ONLY - MEMBERSHIP ELIGIBILITY CONFIRMATION

To be eligible for FULL membership a person **MUST** be currently registered or licenced with the controlling body as (a) public owner, (b) owner, (c) owner-trainer, (d) attendant*, (e) part of a syndicate, (e) in a partnership or (f) registered as a stud manager.

Please provide your Ozchase number:

*** If you are registered as an attendant, the NSW GBOTA's Constitution requires that if you are not over 16 years of age at the time of application you must have been registered with the controlling body for at least two years.**

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 for **full membership** of the Association and attended the Branch meetings on:/...../.....

Branch Chair: (Signature) Branch Secretary: (Signature)

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

Upon becoming a member, the applicant will become eligible to receive communications from Head Office (i.e Annual Reports etc). Please tick if you do **not** wish to receive communication

Head Office only Approved: / /