



The NSW Greyhound Breeders, Owners & Trainers' Association

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APPLICATION FOR BRANCH TRANSFER

I,
(please print name)

being a financial member of the NSW GBOTA, make application to transfer branches:

FROM: BRANCH	TO: BRANCH
Previous Address (if applicable)	Present Address:
	Phone:

Member's Signature: Date:

BRANCH USE ONLY:

BRANCH	BRANCH
We have no objection to the above member transferring from our Branch.	We are prepared to accept the above member in our Branch.
Secretary:	Secretary:
Date of Meeting:	Date of Meeting:

HEAD OFFICE USE ONLY:

Approved by Directors on Date of Meeting: