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|  | **TROTTERS ASSOCIATION OF NEW SOUTH WALES**(TANSW)73 Mitchell Road, Lake Albert  NSW  2650AustraliaTel: 0412 121 275 Email: admin@tansw.com.au |

**MEMBERSHIP RENEWAL / APPLICATION FORM**

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| --- | --- |
| Name: |  |
|  |  |
| Address: |  |
|  |  |
|  |  | State: | Postcode: |
|  |  |
| Occupation: |  |
|  |  |
| Telephone: | (Home): |
|  |  |
|  | (Mobile): |
|  |  |
| Email: |  |
|  |  |

**INDUSTRY INVOLVEMENT** *(please circle)*

Owner Trainer Driver Breeder Stablehand Supporter Other

I hereby apply to become a Member of the Trotters Association of New South Wales Inc. In the event of my admission as a Member, I agree to be bound by the Constitution of the Association for the time being in force.

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| --- | --- | --- |
| Signature |  | Date |

**ANNUAL MEMBERSHIP FEE $25.00**Please return this Form with Membership payment.

|  |  |
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| **Money Order/Cheque:** | Please make out to “**Trotters Association of NSW**” |
| **OR****Direct Deposit:** | BSB: **062 622** Account Number: **1051 1386** |
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*(For reference, please use your first initial & surname plus TA for Trotters Association, in the description)*