

BUNDABERG RACE CLUB INC ABN: 30 034 350 823

Address: 20 Maynard Street Bundaberg QLD 4670 Postal Address: PO Box 1128 Bundaberg QLD 4670

Phone: (07) 4153 1416

E-mail: bundabergraceclub@hotmail.com

ANNUAL MEMBERSHIP – 2025/26

ELIGIBILITY	Every	new applicant must be	proposed/	seconde	d by current BR	C members.	
	Applio	Applicants must be 18+.					
FEES	Annua	Annual membership fee for individual is \$33 (inc. GST)					
	Annua	Annual membership for couple is \$55 (inc. GST)					
ENTITLEMENTS	race d	Each MEMBER shall be entitled to free gate admission to seven (7) thoroughbred race days, voting rights at AGM, and ability to purchase drinks from Members' Bar. Members also receive newsletters and early bird event offers via e-mail.					
NAME OF APPLICAN	NT Mr/M	rs/Miss/Ms					
HOME ADDRESS					Pı	OSTCODE	
POSTAL ADDRESS					Р	OSTCODE	
E-MAIL ADDRESS							
BIRTH DATE CONTACT PHONE NUMBER							
DECLARATION: 1 h	erehv annly f			ACE C			
	rules and reg	or MEMBERSHIP of BUI gulations. I authorise th			my name and o	=	
bound by the Club's Register of Member SIGNATURE OF APP	rules and reg	-	e Secretary	to entei	my name and o	address into the	
bound by the Club's Register of Member SIGNATURE OF APP	rules and reg	gulations. I authorise th	e Secretary	to enter	my name and o	ATE	
bound by the Club's Register of Member SIGNATURE OF APP PLEASE TICK BOX IF	rules and reg	gulations. I authorise th	e Secretary	to enter	my name and o	ATE	
bound by the Club's Register of Member SIGNATURE OF APP PLEASE TICK BOX IF MEMBER DETAILS	rules and reg	gulations. I authorise th	e Secretary	to enter	my name and o	ATE	
bound by the Club's Register of Member SIGNATURE OF APP PLEASE TICK BOX IF MEMBER DETAILS NAME	rules and reg	gulations. I authorise th	e Secretary	to enter	my name and o	ATE	
bound by the Club's Register of Member SIGNATURE OF APP PLEASE TICK BOX IF MEMBER DETAILS NAME ADDRESS SIGNATURE	rules and regres. LICANT FRENEWING	gulations. I authorise th	e Secretary (no propo	ser/seco	my name and o	ATE RC member)	
bound by the Club's Register of Member SIGNATURE OF APP PLEASE TICK BOX IF MEMBER DETAILS NAME ADDRESS	rules and regres. LICANT FRENEWING	ANNUAL MEMBERSHIP	e Secretary (no propo ember)	ser/seconsECON	my name and o	ATE RC member)	