Bucket Racing Association of NSW

_ Membership Form

(insert year)

PLEASE PRINT (Neatly)

Surname <u>:</u>	Given names:OPTIONAL contact details, either:	
No./Street:	Suburb:	
City:	State: Post code:	
	and/or:	
Phone (H):	(W):(Mob):	
Email/Instagram/Fac	and/or: cebook/Other:	
Occupation:	D.O.B.: Grade:	
Other M/C club m'sl	nips: OPTOVA	
Current buckets:	* 10 _N	
	cycles:	
I hereby agree to a	bide by the rules and regulations as set down by the BRA	NSW
Date:	Signature:	
Please enclose a stamp Include payment of \$2	bed self addressed envelope to receive your receipt & membership can be either:	ard.
1. Cheque or money Make cheques pays "The Buck		
2. PayPal: paypal.me/ozb	ucketracing/20	
Name: "Bucke Direct Deposit	SB: 06 2589 Account: 1027 6119 t Racing Association" Reference: name or some other identifying information in the transfer and copy	it ahove
Then send this app		

Then send this application to:

The B.R.A. c/o John Olip 32 Canonbury Grove Dulwich Hill NSW 2203