



Application for Membership

I/We hereby apply to become a member or members of the Western Australian Racehorse Owners Association and I/We agree to be bound by the constitution, rules and by-laws of the Association. I /We declare that I/We are or have been owners/part owners/lessees of a horse registered in accordance with the Australian rules of Racing.

Name/s _____

Address _____

Suburb _____ State _____ Post Code _____

Mobile _____ Home _____

Email _____

Membership Options

- Single Membership \$88 per Financial Year inc GST
- Joint Membership \$132 per Financial Year inc GST
- Registered Syndicate \$264 per Financial Year inc GST

Methods of Payment

- EFT (BSB) **036 016** (A/C No) **94 1432**
- Cheque Cash Credit Card Visa / MasterCard

Card Number _ _ _ _ | _ _ _ _ | _ _ _ _ | _ _ _ _ Expiry _ _ / _ _

Card Holders Name _____

Signature _____ Date _____

Please complete this form & return by Post or Email with payment to:-

Post WAROA, PO Box 404, BELMONT WA 6984

Email waracehorseownersassoc@gmail.com

Phone Amanda 0401 469 066 for Membership Enquiries & Information