



## **JUNIOR MEMBERSHIP REGISTRATION**

Personal Information	
Full Name	
Date of Birth	
Street Address	
Town/Suburb	Postcode
Email	
Club Membership	
Description of Racing Colours	
Allergies/Medical Conditions	

Emergency Contact	
Full Name	
Relationship to You	
Street Address	
Town/Suburb	Postcode
Home Phone	Work Phone
Mobile	Email

### Parent/Guardian Agreement and Signature

By signing and submitting this application I declare that I approve of my child becoming a member of the NSW Mini Trotting Association, warrant that I and my child will follow directions given by duly authorised officers of the NSW Mini Trotting Association and will abide by the rules, regulations and codes of the NSW Mini Trotting Association as issued from time to time, and will not hold the officers of the NSW Mini Trotting Association or its affiliated clubs liable for any accidents and/or injuries arising from my child's participation in mini trotting activities.

Name (Printed)	
Signature	
Date	

The NSW Mini Trotting Association is an Incorporated Body recognised by Harness Racing New South Wales as the peak body for the administration and management of mini trotting activities in NSW. Information provided to the NSW Mini Trotting Association is protected by State and Commonwealth privacy legislation and may only be used for the purposes for which it is collected.

### **JUNIOR MEMBERSHIP REGISTRATION FORM & PAYMENT**

have to be submitted to **LOCAL CLUB SECRETARY**.

**Club Secretary can then forward forms to the state Secretary at [secretary@nswminitrots.org.au](mailto:secretary@nswminitrots.org.au)**

**Payment can then be forwarded to the state Treasurer via direct deposit.**