

# Bucket Racing Association

## 2015 Membership Form

**PLEASE PRINT (Neatly!)**

Surname: \_\_\_\_\_ Given names: \_\_\_\_\_

Street : \_\_\_\_\_ Suburb: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Post code: \_\_\_\_\_

Ph: (H) \_\_\_\_\_ (W) \_\_\_\_\_ (Mob) \_\_\_\_\_

E-mail: Fax: \_\_\_\_\_

Occupation: \_\_\_\_\_ D.O.B.: \_\_\_\_\_ Grade: \_\_\_\_\_

Other clubs: \_\_\_\_\_

Current buckets: \_\_\_\_\_

Other current motorcycles: \_\_\_\_\_

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**I Hereby agree to abide by the rules and regulations  
as set down by the Bucket Racing Association of NSW.**

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

**Please Enclose a stamped self addressed envelope for the return  
of your receipt & membership card.**

**Cheques or Money Order to the value of \$20.00 should be made  
payable to: The Bucket Racing Association of NSW.**

Then send this application to:

**The BRA,**  
32 Canonbury Grove  
Dulwich Hill NSW 2203