



# Pukekohe Park

## COUNTIES RACING CLUB

### Nomination for Membership

I wish to become a member of the Counties Racing Club:

Mr/Mrs/Miss/Ms \_\_\_\_\_  
(name in full)

of \_\_\_\_\_  
\_\_\_\_\_  
(full postal address)

Telephone  
Home \_\_\_\_\_ Mobile \_\_\_\_\_

Email \_\_\_\_\_

I accept this nomination: \_\_\_\_\_ Date \_\_\_\_\_  
(nominee to sign)

#### Proposer

Name \_\_\_\_\_

Signature \_\_\_\_\_

#### Secunder

Name \_\_\_\_\_

Signature \_\_\_\_\_

1/. *Proposer and Secunder must be current financial members of The Counties Racing Club.*

Please fill out the entire form and return to the Office or scan directly to [info@pukekohepark.co.nz](mailto:info@pukekohepark.co.nz)