

APPENDIX ONE

APPLICATION for MEMBERSHIP of the ANRPB Inc

Name of nominating organization:
In the State/Territory of:
Does hereby nominate:
Address:
Contact Details:
As it's representative on the Australian National Racing Pigeon Board Inc
Or in their absence (for whatever reason)
May represent the said state or territory
Signed: Date:
Name of Secretary:
Contact details:

www.anrpb.org