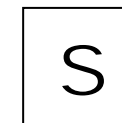




RELINQUISHING MEMBER OF EXISTING SYNDICATE

Other than Company, Firm or Stud



FEE \$15

Member relinquishing interest in the Syndicate Registered as the _____ Syndicate

OUTGOING MEMBER DETAILS:

By signing this form you are acknowledging that you have relinquished your share(s) in the above named syndicate and that the manager has also signed and acknowledged this fact

Title: Surname:

Given Names:

Postal Address:

Suburb: Post Code:

Date of Birth:

Phone Number:

Mobile Phone:

SIGNATURE

DATE OF RESIGNATION: __ / __ / ____

SYNDICATE MANAGER DETAILS:

By signing this form you are acknowledging that the above member is relinquishing their share(s) of the above named Syndicate.

Title: Surname:

Given Names:

Postal Address:

Suburb: Post Code:

Email Address:

Date of Birth:

Phone Number:

Mobile Phone:

SIGNATURE

Mark an 'X' next to the the appropriate alteration:

- ____ Share absorbed within Syndicate
- ____ Share(s) transferred to existing member in Syndicate. Name of Member: _____
- ____ Share relinquished within Syndicate

Queensland Racing

Postal Address: PO Box 63, Sandgate QLD 4017

Phone: (07) 3869 9751

Web: www.queenslandracing.com.au

FEE: \$15

Please circle: Visa Mastercard

Card Number _ _ _ _ / _ _ _ _ / _ _ _ _ / _ _ _ _

Expiry Date _ _ / _ _ Amount \$ _____

Cardholder's Name: _____

Signature of Cardholder: _____