



**I/We would like to apply/renew membership to LTHCC for the 2010 year:**

Name: \_\_\_\_\_

(Single) \_\_\_\_\_

(Family-All) \_\_\_\_\_

Postal Address: \_\_\_\_\_

Town/Suburb: \_\_\_\_\_

State: \_\_\_\_\_ P/code: \_\_\_\_\_

Phone Home: \_\_\_\_\_

Mobile: \_\_\_\_\_

Email Address: \_\_\_\_\_

**Circle type of membership** Single \$25.00      Family \$35.00      Youth \$15.00

Horses nominated : \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Make cheques Payable: Lone Tree Hill Cutting Club OR Payment via internet transfer  
Commonwealth Bank BSB- 063 545 Account- 10239802 Lone Tree Hill Cutting Club and send  
receipt to e-mail lonetreehillcc@gmail.com or fax to 03-5786 5980

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