



QUEENSLAND RACING
Racecourse Road
Deagon QLD 4017
PO Box 63
Sandgate QLD 4017
Telephone : (07) 3869 9777
Facsimile : (07) 3269 8268
Email: info@queenslandracing.com.au

APPLICATION TO REGISTER AS A TELEPHONE BETTOR

TO: QUEENSLAND RACING

Pursuant to Queensland Racing regulations pertaining to the control of telephone betting by bookmakers, the following application is made to be included on the Register of Telephone Bettors

NAME:

(SURNAME)

(GIVEN NAMES)

ADDRESS:

ARE YOU AT LEAST 18 YEARS OF AGE: YES / NO

IN THE EVENT OF SUCH APPLICATION BEING APPROVED, I AGREE:

- (1) To be bound by the Rules of Racing of Queensland Racing and by the regulations relating to the Bookmakers and Bookmakers Clerks.
- (2) That I have given my consent to the recording of all my conversations relative to Telephone Betting transactions between myself and the following Registered Bookmaker.

NAME OF BOOKMAKER: _____

REGION OF REGISTRATION: _____

SIGNATURE OF APPLICANT: _____ DATE: ___ / ___ / ___

TO: QUEENSLAND RACING
PO BOX 63
SANDGATE QLD 4017

Please be advised that I, _____
(Name Of Bookmaker)

make application for the above named person to be included on my register of telephone bettors under account number,

SIGNATURE OF BOOKMAKER: _____ DATE: ___ / ___ / ___