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**Riding for the Disabled Association (NSW) Raymond Terrace & Lower Hunter Centre**

**RENEWING MEMBERSHIP FORM 2020**

Name: ..... DOB: .....  
(Full name of applicant)

Postal Address: ..... Post Code: .....  
(Address)

Phone: ..... Email: .....

Full Membership: \$10..... Social Nonvoting Membership: \$5.....

.....  
(Signature) (Date)

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Office use only - Membership Fee..... Receipt No. .... Date Received .....

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