



Racing Queensland Limited  
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## APPLICATION TO REGISTER AS A TELEPHONE BETTOR

TO: RACING QUEENSLAND LIMITED

Pursuant to Racing Queensland 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 Racing Queensland 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: \_\_\_\_\_

SIGNATURE OF APPLICANT: \_\_\_\_\_

DATE: \_\_\_/\_\_\_/\_\_\_

TO: RACING QUEENSLAND LIMITED  
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 name \_\_\_\_\_

SIGNATURE OF BOOKMAKER: \_\_\_\_\_

DATE: \_\_\_/\_\_\_/\_\_\_