

Capricornia Bushwalkers Inc. – Membership / Renewal Application

I wish to apply for / renew my membership. (New memberships will be provisional, until approved by the next general meeting)	<input type="checkbox"/> Renewal <input type="checkbox"/> New (Tick one box)
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Type of membership.	<input type="checkbox"/> Single <input type="checkbox"/> Family (2 Adults + children) <input type="checkbox"/> Life member
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Membership Fee.	<input type="checkbox"/> \$30 single <input type="checkbox"/> \$50 family
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Personal Information. By law, the club is required to maintain a register of members and their residential addresses. The information collected here is retained by the club secretary for the purposes of club business. The postal or email address you provide here will be used to send your newsletter, and any other club correspondence. The phone numbers will be used emergencies.	Given Name: (s) Family Name: Residential Address: Postcode: Mailing Address: Postcode:
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Family membership: Please list below the names of all other people to be covered by the membership:	Phone: Mobile: Other: Email Address:
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Please email your completed membership form to capbushwalkers@gmail.com or contact the Secretary for other options.

Pay direct: WESTPAC: **Acct Name:** Capricornia Bushwalkers, **BSB:** 034-636, **Acct N°** 388472, **Reference:** Family Name.

Insurance: The club has Public Liability (up to \$20,000,000) and Personal Accident Insurance cover; details available from the club secretary. The cost of insurance is included in the membership fee.

Acknowledgement of Risks and Obligations:

I acknowledge that when I am participating in any activity of the Capricornia Bushwalkers Inc. I am doing so as a volunteer in all aspects and as such I accept all responsibility for loss of property or bodily injury to me, however it may occur.

I acknowledge that my participation in this activity may expose me to hazards and risks that could lead to injury, illness or death or to loss of or damage to my property. In particular when participating in abseiling or above the snowline activities I am aware that I may be exposed to additional hazards and risks.

I will make all reasonable effort to minimise these risks by:

- Only participating in activities within my capabilities,
- Carrying food, water and equipment appropriate for the activity, and
- Advising the leader if I am taking any medication or have any physical or other limitation that might affect my participation in the activity.

I acknowledge that the payment of my membership fee will be deemed as full acceptance and understanding of the above.

I further agree to observe the Club Rules and By-Laws which is available on the club website.

Signature (s): Single or 1 st Adult Family Member	Date: / / 2 nd Adult Family Member
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