



# Toowoomba Bushwalkers' Club Inc. Application for Membership Form

### Membership Fees

\$36.00/year, concession \$30.00/year. For each additional family member add \$12 for insurance. (E.g. a couple will cost \$48). Membership year is September to August.

**Pro Rata Membership:** Membership fees, including the insurance component, will be on a sliding scale dependent on time of year joined. All members MUST be officially recorded in the club register for insurance and legal purposes. Contact Treasurer for amount payable at time of joining.

**Send to:** The Treasurer, Toowoomba Bushwalking Club Inc, PO Box 17, TOOWOOMBA QLD 4350

**EFT Details:** Toowoomba Bushwalkers Club Inc. BSB; 084034 Account; 424323671 (include Surname in reference)

Name:			
Residential Address:			
		Postcode:	
Date of Birth		Preferred Newsletter Delivery Method	<input type="checkbox"/> Email <input type="checkbox"/> Post
Contact Number		Mobile:	
Email			
Emergency Contact Name:		Telephone:	
		<b>Membership Fee:</b>	\$

### Additional Family Members

1.	Name	Date of Birth			
				\$	
2.	Name	Date of Birth			\$
3.	Name	Date of Birth			\$
4.	Name	Date of Birth			\$
<b>Total Payable</b>					<b>\$</b>

### Acknowledgment of Risks and Obligations

I acknowledge that when I am participating in any activity of the Toowoomba Bushwalkers Club Inc that 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 avoid or 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 renewal subscription will be deemed as full acceptance and understanding of the above. Singular references to "I/me" in the above also include the plural.

### Privacy Agreement

The Toowoomba Bushwalkers' Club values its members and accordingly respects their privacy. However on occasions we do need contact details for insurance as well as emergency reasons. Contact information is often used by office bearers and members for the purpose of contacting you regarding the club activities.

Tick Here if you **do not** wish your details to be given out to other members should they wish to contact you.

**Please sign below to confirm that you have read, understand and agree to these conditions.  
Parents/Guardians are deemed to sign on behalf of any minors.**

Applicant 1		Applicant 2	
Name		Name	
Signature	Date	Signature	Date
Proposed By:	Date:	Seconded By:	Date: