

BENALLA BUSHWALKING CLUB MEMBERSHIP APPLICATION (2019)

The annual membership fee is \$45 per person (\$40 (incl. \$5 discount) if paid prior to March 31). Full time students, if accompanied on walks by their paid up parent(s), are covered by the parent(s) membership.

No. of individuals included in application: **Amount Enclosed \$**

Payment Method: Cash / Cheque Online Deposit

For online payments **BSB 803078 Acc. No. 137269. Please use name as reference.**

Membership Renewal New Member

Name/s.....

Postal Address.....

Town.....Postcode.....

Email Address.....Phone.....

ACKNOWLEDGEMENT OF RISKS AND OBLIGATIONS OF MEMBERS PARTICIPATING IN BENALLA BUSHWALKING CLUB ACTIVITIES

NB. To be completed by all new and renewing members

In voluntarily participating in any activities of the Benalla Bushwalking Club, I am aware that my participation in these activities may expose me to risks that could lead to injury, illness or death or to loss or damage to my property. Those risks may include, but are not limited to, slippery and/or uneven ground, falling rocks, cliffs, exposure to weather, white out conditions, heat exhaustion, hyperthermia, creek crossings and snake/spider bite.

To minimize these risks I will endeavour to ensure that-

- (1) any activity in which I participate is within my capabilities, and
- (2) I am carrying food, water and equipment appropriate for the activity.
- (3) I agree to advise the activity leader if I am taking any medication or have any physical or any other limitation that might affect my participation in the activity.

I will make every effort to remain with the rest of the party during any activity and accept the instructions of the leader of the activity.

I accept that I also have an obligation to read and understand the risk management strategy guidelines that the club distributes or makes available in its newsletter or web page from time to time providing guidance and instruction on how to minimise any risks of its activities.

By signing this form and/or payment of my subscription I acknowledge I will be responsible for my actions and fully understand and accept the above conditions.

NAME(1)_____ NAME(2)_____

SIGNATURE(1)_____ (2)_____

DATE_____

AS AT DECEMBER 2018

EMERGENCY CONTACT

NAME.....

HOME ADDRESS.....

TELEPHONE HOME.....**MOBILE**.....

RELATIONSHIP.....

Return completed form to: The Treasurer, Benalla Bushwalking Club, Box 210 Benalla. 3672