



Adelaide Hills Veterans Cycling Club Inc.

Affiliated with the Australian Veteran Cycling Council Inc.

MEMBERSHIP APPLICATION FORM

Surname: _____ **First Name:** _____

Address: _____ **Post Code:** _____

Email: _____ **Tel No. (Hm)** _____

Tel No. (Wk) _____ **Tel No. (Mob.)** _____

Date Of Birth: _____

Emergency Contact Name: _____ **Ph:** _____

Trial Membership: 1st Date _____ 2nd Date: _____

It is understood that the trial membership is open only to riders who are new to our sport. Following the first trial ride, the second trial ride must be taken within a period of 1 month after this date. Any subsequent ride with the AHVCC will require a full licence.

Membership Fees

Rider Membership **\$130** / Pensioners **\$120** / Official and Non-riding associate members **\$15**

Trial membership **FREE**. (Membership is from 1st October to 31st December the following year)

ENCLOSED FEE: \$ _____

Please make cheque/money order payable to: Adelaide Hills Veterans Cycling Club Inc. **or**
Electronic Funds Transfer (EFT) to: BSB 805 023 ACC No: 0432 2104 Reference: **Your Surname**
Return to: The Secretary, AHVCC, PO Box 1702, Mt Barker SA 5251.

I DO HEREBY ACKNOWLEDGE that: I agree to take my turn as corner marshall/safety car driver when I am rostered for this duty, AND, when I am not available for my rostered turn, I agree to organise a substitute for that occasion; In consideration for my participation in the cycling activities of the club I freely release the club, **Adelaide Hills Veterans Cycling Club Inc.** and the **South Australian Veteran Cycling Council Inc.** and officials of the aforementioned bodies for any and all liability for any injury, loss or damage arising out of the activities.

DISCLAIMER

I am aware that all forms of cycling (including, but not limited to, training or racing on unclosed public roads or on cycle tracks) are dangerous activities and in undertaking any such activities I do so at my own risk. I am also aware that it is a condition of my membership of the, that the **Adelaide Hills Veterans Cycling Club Inc** its committee, race directors, marshals, members, servants or agents are absolved from all liability howsoever arising in respect of any injury to me (whether fatal or otherwise) or any damage to my property arising out of my membership of the Club or participation in any cycling or other activity carried out by the Club or in any way whatsoever due to any negligent act, breach of duty, default and/or omission on the part of the Club, its committee, race directors, marshals, members, servants or agents. I am also aware that any person participating in any cycling or other activity carried out by the Club is only allowed to do so on the distinct understanding that they do so at their own risk. I have no known physical or mental condition which has the potential to put myself or any other person at risk. I also agree to follow any instructions given by the race director, any race official or race marshal.

SIGNATURE: _____ **DATE:** _____

OFFICE USE ONLY

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|--------------------|----------------------|
| Receipt No: | Receipt Date: |
| Licence No: | Division: |