

REDLAND BUSHWALKERS Inc.

P.O. Box 101 Cleveland QLD 4163

Dated: 24th May 2023

MEMBERSHIP APPLICATION

- 1. Complete your personal details below.
- 2. Have your application proposed and seconded by 2 existing club members.

| 3. Sign* the Acknowledgment of Risk (AOR)4. Pay the appropriate membership fee. | | |
|--|-------------------------|------------------------------------|
| The Management Committee can only cor meeting held after receiving (a) this signed | | • |
| *Typing your name in the signature field is accept personal email address provided in your contact of | | orm to the club email from your |
| NAME | | |
| SURNAME | FIRST NAME | |
| RESIDENTIAL ADDRESS & CONTACT | <u>DETAILS</u> | |
| STREET ADDRESS | | |
| SUBURB | STATE | POST CODE |
| HOME NUMBER | MOBILE NUMBER | |
| EMAIL ADDRESS | | |
| POSTAL ADDRESS (if different from abo | ove) | |
| STREET ADDRESS | | |
| SUBURB | STATE | POST CODE |
| EMERGENCY CONTACT DETAILS (a po | erson usually available | e when you are on a club activity) |
| SURNAME | FIRST NAME | |
| RELATIONSHIP | | |
| HOME NUMBER | MOBILE NUMBER | |
| | | |
| PROPOSER | SECONDER | |
| SIGNATURE | SIGNATURE | |
| | | - |

ACKNOWLEDGEMENT OF RISKS AND OBLIGATIONS OF MEMBERS

This acknowledgement of risks (AOR) applies to all club activities I may undertake as a member of Redland Bushwalkers Inc.(The Club). In voluntarily participating in activities of the Club which are described to me by the activity leaders I am aware that my participation in the activities may expose me to hazards and risks that could lead to injury, illness, or death or to loss of or damage to my property. I also acknowledge that I may encounter weather conditions that could lead to hypothermia and being in locations where evacuation for medical treatment may take hours or days. In particular, when participating in abseiling or above the snowline activities I am aware that these activities could expose me to additional hazards and risks described to me by the activity leader.

To minimise risks I will endeavour to ensure that:

- 1. Each activity is within my capabilities,
- 2. I am carrying food, water, medication, and equipment appropriate for the activity.
- 3. I will advise the activity leader if I am taking any medication or have any physical or other limitation that might affect my participation in the activity.
- 4. I will make every effort to remain with the rest of the party during the activity.
- 5. I will advise the leader of any concerns I am having, and
- 6. I will comply with all reasonable instructions of club officers and the activity leader.

I have read and understand the above requirements. I have considered the risks before choosing to sign this acknowledgement of risk. I still wish to join the activities of the Club. I acknowledge that I will take responsibility for my own actions and that signing this form and the payment of my subscription will be deemed as full acceptance and understanding of the above conditions.

| 1. I am 18 years of age or older: | YES | NO |
|--|-----|-----|
| 2. I have read and understand the requirements of the AOR: | YES | NO |
| 3. I have been advised of the Clubs Personal Accident and Public | | NO |
| Liability Insurance policies provided by Bushwalking Australia*: | YES | 110 |
| 4. I have read and agree to abide by the Club's Code of Conduct**: | YES | NO |

^{*}Details available at the following website http://www.bushwalkingaustralia.org/insurance

OFFICE USE: Completed forms to be returned to:

Treasurer - to record payment.

Secretary - to record AOR signed and archive.

Membership Secretary - to assign Member ID

Date

Cash EFT CHQ

Email Paper

ID#

^{**}Details available at the following website https://redlandbushwalkers.org.au/club-documents

MEMBERSHIP FEES:

Membership is from the 1st January to the 31st December each year. The membership fee due depends on the date of application, please tick the appropriate box:

If you join between 1st January - 30th June

FULL YEAR MEMBERSHIP - Valid to 31st December this year COST \$40

If you join between 1st July - 30th September

HALF YEAR MEMBERSHIP - Valid to 31st December this year COST \$20

If you join between 1st October - 31st December

15 MONTH MEMBERSHIP - Valid to 31st December next year COST \$40

Temporary member fees paid in this calendar year (up to a maximum of \$10) count towards your membership fee. Enter below any fees paid and only pay the balance owing.

TEMPORARY MEMBER FEES PAID \$

BALANCE DUE \$ BALANCE PAID

METHOD OF PAYMENT: Electronic Funds Transfer preferred - the Clubs Westpac Bank account details are provided below:

BSB ACCOUNT 034-070 NO. ACCOUNT 220127

NAME REDLAND BUSHWALKERS REFERENCE [Your Name] MEM [Year]

NOTE: The reference field is limited to 17 characters by some banks. Any extra characters may not appear in the bank statement resulting in your payment being undecipherable. If you have a long name then use your first initial and surname, or just your surname if necessary. Example: John Smithfield **[Your Name]** paid his annual membership fee **[MEM]** for year **[current year]** would have to be entered as **SMITHFIELDMEM2021** if there is a 17 character limit imposed by your bank.