

Beverley Districts Motorcycle Club Inc.

Visit us online at www.beverleymx.com

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2009 MEMBERSHIP APPLICATION

<u>Annual Membership</u> (please circle the membership option required) Senior Riding Member.....\$100.00 Junior Riding Member(16 yrs & under).....\$50.00 Non-Riding Member.....\$25.00 Family Membership*.....\$250.00 *2 adults and 2 children-immediate family	<u>Casual Membership- single day ride only</u> (please circle the membership option required) Riders without valid MWA/Nat lic. sighted.....\$50.00 (Price includes Day License, 1 day Club Membership and track fee) Riders able to show valid MWA/Nat lic.....\$30.00 (Price includes 1 day Club Membership and track fee) 1 Year MWA recreational licenses also available.....\$85.50
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APPLICANT DETAILS (One form per applicant, **please print clearly**)

Surname.....First name.....DOB.....

Home Address.....Suburb.....Postcode.....

Postal Address -if different to home.....Postcode.....

Ph No.....Mob No.....Email.....

MWA/Rec License No.....Exp Date.....Rider/Bike No (if you have).....

AMBULANCE COVER...YES / NO If YES, Provider and Member No.....

****If NO, You agree to obtain ambulance cover & provide details at your next ride meeting.....YES**

Please list any Allergies or Medical Conditions that may effect the administration of First Aid

(details remain confidential and used only in an emergency)

EMERGENCY CONTACT/NEXT OF KIN

Name.....Relationship..... Ph No.....

Disclaimer: I/We participate solely at my/our own risk and shall have no claim of any nature whatsoever against The Beverley Districts Motorcycle Club Inc., or any of its staff, servants, officials, agents or owners of the land, from any injuries suffered to myself or damage to my property, whether or not the same has been or contributed to directly or indirectly by any act of omission or error.

I/We recognize that motorcycle sport is dangerous and agree to these conditions.

Applicants Signature.....Date...../...../2009

Parent/Guardian Signature (if applicant under 18yrs).....Date...../...../2009

Parent/Guardian Name and ph no# (please print).....

OFFICE USE ONLY	Amount Paid \$	Receipt No	Circle: Cash or Cheque	Received By
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