



Catholic Bushwalking Club Inc.

ABN 70 140 698 813

✉ PO Box 393, Pennant Hills, NSW 1715

☎ 0478-919-427 – Sue Russell, Membership Secretary

e-mail membership@cbcsw.org.au

Internet http://www.cbcsw.org.au

Please return completed form to Sue Russell at 4/150 Wellington St., Bondi NSW 2026

APPLICATION FOR MEMBERSHIP

Name

Address Postcode

Telephone Mobile

e-Mail Address

The applicant must answer all of the following questions:-

Do you own a:

Backpack Raincoat

Torch Groundsheet

Compass First Aid Kit

Can you swim?

Do you hold a current First Aid Certificate (If yes give expiry date)?

Do you hold a current Lifesaving Certificate (If yes give expiry date)?

Have you reached the age of 16 years?

Medical condition(s) (that may affect bushwalking ability)

Emergency Contact (Name) (Home Phone) (Mobile)

Next of Kin (Name) (Home Phone) (Mobile)

I warrant that the answers provided in this form are complete and correct and I subscribe to the aims and objectives of the Club and agree to abide by the provisions of the Constitution and By-Laws.

I certify that I am medically and physically fit to go bushwalking.

Acknowledgement & Waiver

I accept that the activities of the Club may be considered "adventure sport" and may require appropriate physical fitness, competence and equipment and may involve an element of risk and I will participate voluntarily and in the knowledge of the fitness, competence and the equipment required, fully understanding and accepting the risks involved. I will take part in Club activities at my own risk and will hold none of the Club, the leader(s), others involved in organising or assisting with a Club activity or any of the other participants in an activity responsible for any death, injury or loss that may result to myself or to others through my participation in the activity whether due to negligence, misadventure, accident or otherwise. If I invite visitors on an activity or deliberately or otherwise provide details of Club activities to others I indemnify the Club and agree that in doing so I will make the terms of this Acknowledgement and Waiver clear and ensure that those participating in an activity as a consequence are aware they do so in full acceptance of this Acknowledgement and Waiver. The Club, its leaders, those assisting in organising and those participating in an activity may, to the fullest extent permitted by the law, rely on this Acknowledgement and Waiver as a bar or limitation to any claim for death, injury or loss that may result from such activity.

I hereby apply to be admitted to Membership of the Catholic Bushwalking Club Inc and agree to accept the Club's decision as to my application.

Signature of Applicant

.....
(Date)

Failure to pay the balance of the annual membership fees will result in your application being delayed or rejected

WALKS ATTENDED

Insert details from the newsletter

Walk Number	Date	Route	Grade	Leader

Four or more walks of Grade 2 or higher standard must be listed above

NAVIGATION & MAP READING ADVICE & EQUIPMENT REVIEW

The applicant should arrange with a member of the Committee to receive advice in navigation and map reading and for an equipment review.

.....
Navigation & Map Reading Advice given (Signed)

.....
Equipment Reviewed (Signed)

.....
(Date)

.....
(Date)

NOMINATION

The applicant should obtain the nomination and signatures of four Honorary or Ordinary Club Members.

We, the undersigned, hereby recommend this application for admission to the Club.

Signature of Club Member	Number of Club walks with Applicant

.....
(FOR COMMITTEE USE ONLY)

Is the member a Catholic Yes No

Fee for prospective membership paid.....
(Date)

Balance of Annual Membership fee paid.....
(Date)

.....
Treasurer (Signed)

Attendance checked.....
(Date)

Applicant enrolled as a prospective member.....
(Date)

Prospective membership expires.....
(Date)

.....
Membership Secretary (Signed)

Application approved:

.....
President (Signed)

.....
(Date)