

# Manningham Bicycle User Group Membership Form

Name(s) \_\_\_\_\_

Address \_\_\_\_\_

Phone number(s) \_\_\_\_\_

Email address(s) \_\_\_\_\_

Your newsletter will be sent to the above email address unless this box is ticked

Enclosed is annual membership of (circle one) **\$25 - Single or \$40 - Family**  
Or if joining between Jan 1<sup>st</sup> & April 30<sup>th</sup> (circle one) **\$12.50 - Single or \$20 - Family**  
Cheques should be made out to **Manningham BUG Inc.**

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The following must be filled in and signed by **each** cycling member or their parent/guardian:

Manningham BUG (Bicycle User Group) Ride Entry Form.

I understand that bicycle riding can be a dangerous activity and my family and I take part in Manningham Bicycle User group (BUG) activities voluntarily. I understand that participation in this ride involves riding on public roads used by other traffic, and in doing this I am aware of the potential dangers, both on and off public roads. In my judgment, I am capable and competent to participate safely in this ride. I accept that I am to wear a helmet, abide by road rules and understand no one other than myself has the responsibility for my property damaged or stolen. I accept sole responsibility for loss or injury how so ever incurred during a Manningham BUG activity.

I hereby release and exempt Manningham BUG, its officers, sponsors, event organizers, and all other persons involved with Manningham BUG activities from actions, proceedings, demands, claims, or suits what so ever made or taken by any person arising out of my family's participation in Manningham BUG events. Manningham BUG reserves the right at any time to refuse entry to an event and to cancel or vary published events without notice.

Signature \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Name (Printed) \_\_\_\_\_ Emergency Phone No. \_\_\_\_\_  
(i.e. someone to contact if you are injured etc)

Please attach your cheque and send the form to

**Manningham BUG Inc**  
**PO Box 4116**  
**Doncaster Heights 3109**