



BUSHWALKERS OF SOUTHERN QUEENSLAND INC.

Application Form for Annual Renewal of Membership

PART ONE: Members to complete and return either the original or a scanned copy to the Treasurer, along with the annual membership fee, within two months of the Annual General Meeting.

Return Postal address: GPO Box 1274 Brisbane QLD 4001

Return Email address: bushwalksq@gmail.com

Please use cross in the box where applicable (BLOCK LETTERS PLEASE)

First Name:	Surname:
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ADDRESS

Do you want address to appear in any club list?

- Yes, you may publish my address to all club members
- No, I do not want my address to appear in any club list provided to all club members

Home Address:	Postcode:
Postal Address:	Postcode:

(If your postal address is the same as your home address, please write 'As above'.)

PHONE

Do you want phone numbers to appear in any club list?

- Yes, you may publish my preferred phone number to all club members
- No, I do not wish my phone numbers to appear in any club list provided to all club members

Phone No. Preferred:	Phone No. Alternative:
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EMAIL

Details will be stored in the clubs database and will only be available to Management Committee Members.

Email Address:

IN CASE OF EMERGENCY (ICE) OR IN THE EVENT OF UNFORESEEN CIRCUMSTANCES (e.g. Trip Delays), PLEASE CONTACT:

Details will be stored in the clubs database and will only be available to Management Committee Members.

ICE Contact Full Name:	
Contact Phone No. Preferred:	Contact Phone No. Alternative:

Acknowledgement of Risk

I acknowledge that when I am participating in any activity of the Bushwalkers of Southern Queensland Inc. I am doing so as a volunteer in all aspects and as such I accept all responsibility for loss of property or bodily injury to me, howsoever it may occur.

I acknowledge that my participation in this activity may expose me to hazards and risks that could lead to injury, illness or death or to loss of or damage to my property. In particular when participating in abseiling or above the snowline activities I am aware that I may be exposed to additional hazards and risks.

I will make all reasonable efforts to avoid or minimise these risks by: only participating in activities within my capabilities; carrying food, water and equipment appropriate for the activity; and advising the leader if I am taking any medication or have any physical or other limitation that might affect my participation in the activity.

I acknowledge that the payment of my renewal subscription will be deemed as full acceptance and understanding of the above.

Signature:		Date:
Fee Paid:	Circle: EFT / Cash / Cheque	Date Paid:

PART TWO: Membership Fees for 2019-20:

Single \$35.00

Direct Deposit Available:
(EFT)

Bank	Commonwealth
BSB	06 4002
Acc No	00901927
Acc Name	Bushwalkers of Southern Queensland Inc or BOSQ
Reference	Surname and Initials

PART THREE: Communications and Newsletter Options

- Receive Email Communication (Including Footnotes)
- Receive an Email copy of Footnotes only, i.e. no other Email Communications
- Receive a printed copy of Footnotes

PART FOUR: (Office use only)

Record of completed actions	Officer	Date
1. Payment received and receipted. Form given to the Database Manager (for record of club members and dispatch of Footnotes.)	Treasurer	
2. Records updated. Arrangements made for Newsletter Dispatcher to send Footnotes. Form returned to Members Officer.	Database Manager	
3. Form placed on file	Members Officer	