



Point Cook Runners

Membership application 2018 - 2019 (Membership Year 1st April - 31st March)

Membership Type: Single \$15 Family \$ 30 (Family - 2 adults/3 kids same household)

Tick if part of family membership (A form must be completed a form for all family members)

Signed: _____ Committee Member

Family Name: _____ Given Name: _____ Date of Birth: / /

Address: _____

Suburb: _____ Postcode: _____

Email address: _____

Private No: _____ Mobile: _____

Occupation: _____

First aider: Yes/No Permission to distribute: Yes/No

Emergency contact Name: _____ Contact No: _____

Running is a physically active sport. You should always seek advice from your GP before taking up a strenuous physical pursuit such as this.

In consideration of and as a condition of membership of the Point Cook Runners Incorporated, I for myself, heirs, executors and administrators, hereby waive all and any claim, right of courses of action, which I or any respective heirs, executors and administrators might otherwise have, either now or in the future for or arising out of a loss or injury, damage or loss of any description whatsoever and howsoever caused including negligence suffered or sustained in the course of, consequent upon or incidental to my membership of the Point Cook Runners Incorporated or my participation in any event or function conducted by the Point Cook Runners Incorporated and this release shall operate separately in favor of all persons, bodies, agents, representatives, officials, marshals, officers and members of the Point Cook Runners Incorporated.

This membership does not give you personal injury insurance cover that can be obtained by joining Athletics Victoria at a cost of \$100 per year 1st April - 31st March

Signed _____

Date: / /

Receipt Date paid: / /

Also available Direct Payment via

Account Name: Point Cook Runners

BSB: 6 3 3 - 0 0 0

Acct # 158133033 (Please state your name as reference)

email:- pointcookrunners@gmail.com