



BUSHWALKERS OF SOUTHERN QUEENSLAND INC.

Application Form for Readmission to Membership after an Absence

PART ONE: Applicant to complete

First name	
Surname	

(BLOCK LETTERS PLEASE)

Home Address:		Postcode:
Postal Address:		Postcode:

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

Phone:	Home:	Mobile:	Work: (optional)
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Email Address		You will receive a printed copy of the newsletter, <i>Footnotes</i> . Do you wish to receive extra club information by email? Y or N	<input type="checkbox"/>
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In the event of unforeseen circumstances (e.g. trip delays), please contact:

Name:		Address:	
Phone:	Home:	Work: (optional)	

Privacy: Please circle **address, phone or email** if you do not want them included in any list provided to all club members.

Risk waiver: In regard to any BOSQ activity in which I choose to participate:

- I am aware that my participation in the activity may expose me to risks that could lead to injury, illness or death or to loss of or damage to my property.
- I acknowledge that I take part in the activity entirely at my own risk.
- I shall ensure that the activity is within my capabilities.
- I will advise the leader of the activity if I am taking any medication or have any physical or other limitation that might affect my participation in that activity.
- I will make every effort to remain with the rest of the party during the activity.
- I undertake to follow all reasonable directions of the leader of the activity.
- I recognise that the activity could be dangerous and that things may not go according to plan.
- I shall carry food, water and equipment, including sturdy enclosed footwear, appropriate for the activity.
- In an emergency situation, I agree to pay all expenses that may be incurred on my behalf.
- If I am accompanied by a child of whom I am the parent or guardian, I shall obtain the consent of the outings leader for the child to participate and I shall take full responsibility for the child. I shall write the child's name, date of birth and sign for the child on the nominations form for the activity (insurance obligation).
- I have read and understand these risks and obligations. I still wish to re-join the club. I accept that in signing this form I am waiving my rights to sue the leader, individuals in the club and other participants in activities. I agree that any contract arising from my participation will exclude any liability arising from the supply of goods and services by the club leader. I agree to indemnify all trip leaders and all other club members against any loss or damage which may be sustained by them as a result of or in connection with my participation in club outings.

Date:		Signature:	
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