



**Application for Membership
Essendon Bushwalking Club Inc.
(A0005559B)**

Name: _____

Address: _____

_____ Post Code: _____

Home Phone: _____ Work Phone: _____

Email: _____

Please tick box if you would prefer Old Man Emu Issued via Email?

Next of Kin: (For use in emergency situations only)

Name: _____

Address: _____

_____ Post Code: _____

Home Phone: _____ Work Phone: _____

Mobile Phone: _____

Health Conditions of which leaders should be aware of (e.g. Diabetes, Heart Condition)
Please refer to the Club Secretary if unsure of what should be included here.

I, the above named applicant desire to become a full member of the Essendon Bushwalking Club Incorporated. In the event of my admission as a member of the Essendon Bushwalking Club Inc. (EBWC), I agree to this release of claims, waiver of liability and assumption of risk. I waive any claims I may now and in the future have against and release from liability and agree not to sue the EBWC, its Committee and leaders for any personal injury, death, property damage, or loss sustained by me as a result of my participation of any EBWC event, due to any cause whatsoever, including without limitation, negligence on part of the EBWC or its leaders. I agree to be bound by the rules of the club for the time being in force.

Please turn over

In support of this application, I submit details of walks I have participated in as follows:-

Membership Requirements

1. Complete to the satisfaction of the Committee three day walks, each of qualifying standard, or two club program weekend walks necessitating camping out. All club walks shall be qualifying, except those marked non-qualifying on the program.
2. Pay the prescribed membership fee.
3. Be of the full age of eighteen years.

Date Attended	Day or Weekend	Location	Leaders Signature

Signature of Applicant

Date

Proposer and Seconder Details

I, _____ being a member of the club of at least six months standing, nominate the applicant, who is personally know to me for membership of this club.

Signature of Proposer:

Date

I, _____ being a member of the club of at least six months standing, nominate the applicant, who is personally know to me for membership of this club.

Signature of Seconder:

Date

Office Use Only			
Committee Date	Application moved by	Seconded by	Result
Date Fees Received (Treasurer)	Date provided with initial membership pack	Date entered into records (Secretary)	Date application filed in club records (Secretary)

Essendon Bushwalking Club Inc. PO 32 Moonee Ponds Vic 3039. Club contact Ron Bell: 9338 4057.