MANUKAU CITY VETERANS CYCLING CLUB INC (the "Club")
ANNUAL SUBSCRIPTION 2017

Name:..... Date of Birth: .....
Address .....
Car Registration: ..... Phone home .....
Occupation: ..... Phone Mobile:.....
E-mail: .....
Emergency Contact: ..... Phone:.....
Member Since ..... E-mail newsletter: Yes/No

All information supplied will be included in the Club membership list and circulated to financial members.

INDEMNITY DECLARATION

In consideration of the acceptance of my membership I hereby for myself, executors, administrators and assignees indemnify and release the Club and all persons involved in the conduct of the Club from all claims of damages or actions whatsoever in any manner arising out of my participation in the Club and Club Events.

I acknowledge that I am fully aware of the risks involved in participating in Club Events, Rides & Activities. I further undertake that I am sufficiently fit to ride in Club events & rides safely and that my bicycle and other equipment used in Club events & rides will be in good working order and condition. I also acknowledge that I have received, and agree to abide by, the Club's "Code of Conduct and Road Safety Rules" (dated 1 January 2006) and agree that the Committees decision is final.

I accept that as a member of the Club I will be required to perform club duties. These duties include (but are not limited to) – marshalling at Club events, cleaning around the hall and possibly acting as a Ride Manager. *The organizers of the roster will endeavour that no person is rostered for club duties more than once per year.*

PRIVACY ACT

I consent to the above details being collected by the Club for the purpose of compiling the Club's membership records and disclosing those details to any sponsor of the Club and to all other Club Members. I acknowledge that under the Privacy Act 1993 I have the right of access to and correction of my personal information held by the Club.

My subscription of $30 is enclosed ($25 for 70 years and over) Direct credit 030355 0325795 00
Please send completed form and cheque payment to:
Manukau City Veterans Cycle Club Inc, 79 Uxbridge Road, Cockle Bay, Auckland 2014
or email completed form to deverick@xtra.co.nz

Signature:..... Date:.....

Manukau City Veterans Cycle Club Membership Card	**Emergency Contacts:**
Name: 2017	
Address:	
.....	**Allergies or Known Medical Conditions:**
Expiry 03/18	

Collect your membership card from the Ardmore Hall after any club ride