



MEMBERSHIP NOMINATION FORM

NAME			
ADDRESS			
MOBILE			
EMAIL			
BIKE MAKE		BIKE REGO	
ROADSIDE ASSISTANCE COMPANY NAME			
NEXT OF KIN/ EMERGENCY CONTACT		MOBILE NUMBER	
ANY FOOD ALLERGIES/ DIETARY REQUIREMENTS? (FOR CATERING PURPOSES)			
IF YES, PLEASE LIST			
MEDICAL ALERTS (IN CASE OF EMERGENCY)			
ARE YOU HAPPY FOR YOUR PHOTO TO BE TAKEN FOR MEDIA AND PROMOTIONAL REASONS	<input type="radio"/> YES <input type="radio"/> NO		

NOMINATION INFORMATION (IF NOT NOMINATED BY A CURRENT FINANCIAL MEMBER, COMMITTEE WILL DECIDE)

Nominated/Introduced By:			
Name			
Address			
Email			
<p>Applicant must have attended two rides or coffee meetups to be considered for membership.</p> <p>This will ensure that the applicant is happy with the group they wish to be a member of and understand what is required as a member.</p>			
APPLICANT SIGNATURE		DATE	
COMMITTEE ACCEPTED			
SIGNED (SEC OR CHAIRMAN)		DATE	

MEMBERSHIP COSTS - \$ 75.00 PER ANNUM – PER FINANCIAL YEAR - PRORATA

(Includes: Membership, Admin Fee, Name Badge)

Please see over for Motorcycle Ride Waiver Release and Consent

MOTORCYCLE MENS SHED – PERTH

Email: secretary@mcms.org.au



MOTORCYCLE RIDE WAIVER RELEASE & CONSENT

Safety is our primary concern

Please observe all federal, state and local laws, and ride safely and defensively.

We request that you wear a helmet, appropriate clothing and eyewear. If you arrive to a ride without a helmet and safety gear, or your bike is not deemed roadworthy, you will be asked to leave the ride.

Ride with your headlight on at all times and never ride under the influence of alcohol or drugs.

In consideration of my participation in any event or meet with the Motorcycle Men's Shed – Perth, I HEREBY WAIVE AND RELEASE ANY AND ALL RIGHTS AND CLAIMS OF ANY NATURE, ROUNDED IN WHOLE OR IN PART UPON ANY TYPE OF NEGLIGENCE, arising out of or resulting from any and all injuries or damages of any nature, including death, which (I) may suffer while taking part in an event or any activities connected with the Motorcycle Men's Shed – Perth, I UNDERSTAND, THAT BY SIGNING THIS DOCUMENT I AGREE NOT TO SUE any or all of the Released Parties in connection with the Motorcycle Men's Shed, Perth.

Rider name	Rider Signature
Date	

RIDE ATTENDANCE DETAILS – Rider to complete prior to financial membership application

RIDE/ MEET ATTENDANCE 1: Location Date Committee Member Name: Signed off:	RIDE/ MEET ATTENDANCE 2: Location Date Committee Member Name Signed off:
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Once signed off, please email to secretary@mcms.org.au

OFFICE USE ONLY	
Application received by Secretary Date:	Approved by committee Date:
Invoice sent: Date:	Member No:
Payment received Date:	Receipt no:
New Member Merch ordered Date:	Merchandise delivered to Member by Name: Date: