



Downs Motorcycle Sporting Club Inc.

(Affiliated to Motorcycling Queensland)



RASQ Showgrounds, Glenvale Rd, Toowoomba Qld—Postal Address: PO Box 119 Toowoomba Qld 4350

Membership Application

SINGLE: \$30.00

FAMILY: \$40.00

ASSOCIATE/SOCIAL: \$10.00

MEMBERSHIP RUNS FOR CALENDAR YEAR

Cash, Cheque or Bank Transfer Accepted Payments

N.B. Membership not considered until cheque/tranfer completed

If paying online reference your name and email dmcsc@outlook.com

Downs Motorcycle Sporting Club

Bendigo Bank BSB 633-000 Acc No. 119178010

The committee of the Downs Motorcycle Sporting Club reserves the right to refuse membership to any person deemed unsuitable for membership. The committee is not obliged to give reason as to why the membership was rejected.

ALL NEW APPLICANTS AND RENEWING MEMBERS MUST COMPLETE AND SIGN THE INDEMNITY FORM BELOW AND THE MEMBERSHIP FORM

INDEMNITY

WARNING! THIS IS AN IMPORTANT DOCUMENT, WHICH EFFECTS YOUR LEGAL RIGHTS AND OBLIGATIONS. READ IT CAREFULLY AND DO NOT SIGN IT UNLESS YOU ARE SATISFIED YOU UNDERSTAND IT.

ACKNOWLEDGEMENT OF RISKS, DANGERS AND OBLIGATIONS—I ACKNOWLEDGE that motorcycling is dangerous and that by engaging and participating in the activity I am exposed to certain risks and dangers and am under certain obligations as follows:

- a) That I may be injured, physically or mentally, and may be killed;
- b) That my machinery or equipment may be damaged, lost or destroyed;
- c) That other participants may ride dangerously or with lack of skill;
- d) That track, road or event conditions may be hazardous and may vary without warning or predictability;
- e) That organizers, officials, landowners/track operators or any agents or representatives of those in charge of motorcycle activities are frequently obliged to make decisions under pressure of time and/or events;
- f) That any policy of insurance of or in respect of my life or physical or mental health may be voided;
- g) That there may be no or inadequate facilities for treatment or transport of me if I am injured;
- h) That I have an obligation to myself and to others to compete safely and within the rules of competition.

INDEMNITY GIVEN TO THE CONTROLLING BODY—IN CONSIDERATION of the acceptance of my application for membership, I AGREE TO INDEMNIFY Motorcycling Australia and its affiliates in the following manner:

- a) That I participate in the motorcycling activity at my sole risk and responsibility;
- b) That I accept all venues as they stand with all or any defects hidden or exposed;
- c) That I indemnify and hold harmless Motorcycling Australia, their respective servants, agents or officials and affiliates against any actions or claims which may be made by me or on behalf or by other parties for or in respect of or rising out of my death or any injury, loss or damage caused to me or to my machinery or equipment, whether caused by negligence, breach of contract or in any other manner whatsoever.

I (applicant's signature) _____ Date ____ / ____ / ____

agree to be bound by the rules and regulations of Motorcycling Australia and its affiliates.

MEMBER DETAILS

NAME: _____

ADDRESS: _____

HOME PH: _____

WORK PH: _____

MOBILE PH: _____

EMAIL: _____

1ST EMERGENCY CONTACT: (name) _____

(contact) _____

2ND EMERGENCY CONTACT: (name) _____

(can not be pillion passenger) (contact) _____

APPLICANTS SIGNATURE: _____

RENEWAL NEW MEMBERSHIP DATE: ___/___/___

SINGLE FAMILY SOCIAL ASSOCIATE



ASK ABOUT OUR MERCHANDISE

DMCSC Shirts and Caps-Members Only

The central graphic is framed by a decorative border of small motorcycle icons. It features the DMCSC logo (Downs Motor Cycle Sporting Club) on the left, a cap with the logo below it, and a blue polo shirt with pink trim on the right. The text 'ASK ABOUT OUR MERCHANDISE' is prominently displayed in the center, with a grey box below it stating 'DMCSC Shirts and Caps-Members Only'.

SECRETARY USE ONLY (New Member to Read)

*New applications for membership must be nominated and seconded by current financial members along with the membership fee **before** being considered for membership as an **Ordinary Member** (including **Family Membership**).*

*To be considered for **Ordinary Membership** an applicant must return completed membership form to the secretary/committee member.*

***Social/Associate** membership becomes valid when the application for membership is successful and the membership fee is paid. **Social/Associate** members are not able to vote or chair the committee.*

Nominated by: _____ Signature: _____

Seconded by: _____ Signature: _____

Receipt No: _____ M'ship No: _____

Amount Paid: _____ Date Paid: _____

Renewal only—Date 1st joined: _____

Comments/Dates events attended: _____

Bike(s) & km: _____