



Application for Membership to Girls Ride Out Inc.

Membership Fees: New Member : \$25 - \$5 Joining Fee, \$20 Annual Fee
 Membership Renewal : \$20 - Annual Fee

Make cheques payable to 'Girls Ride Out Inc' and post to
 Membership Officer, Girls Ride Out Inc, PO Box 118, Westgate NSW 2048
 For enquiries please go to www.girlsrideout.com or Call 0410 247 071

MEMBER DETAILS		<input type="checkbox"/> New	<input type="checkbox"/> Renewal	Membership No.	(If Known)
First Name	Surname			Male/Female	
Mailing Address				Postcode	
DOB			Email Address		
Home Phone			Mobile Phone		
How did you hear about Girls Ride Out					
Website <input type="checkbox"/>		Word of Mouth <input type="checkbox"/>		Media <input type="checkbox"/>	
		Motorcycle Show <input type="checkbox"/>		Dealer/Shop <input type="checkbox"/>	

TELL US A BIT ABOUT YOUR RIDING INTERESTS

Make/Model of Bike/s	Years Riding
Do you currently hold a Learner's Permit or Provisional Licence? Yes / No Type <input type="text"/>	
Are you interested in participating in any of the following? (Please tick)	
Learner Assistance (Learn 'N' GRO) <input type="checkbox"/>	Track Days <input type="checkbox"/>
Maintenance Days/Nights <input type="checkbox"/>	Weekends Away <input type="checkbox"/>
	Girls Only Racing <input type="checkbox"/>
	Day Rides <input type="checkbox"/>
Other Events : _____	

THE LEGAL STUFF

I hereby apply to become a member of GIRLS RIDE OUT INC. As an essential component of my admission as a member, I agree to be bound by the rules of GIRLS RIDE OUT INC existing at this time. In consideration of my being granted membership to GIRLS RIDE OUT INC, I acknowledge that:

- I am legally licensed to ride a motorcycle and the motorcycle I am riding is registered.
- I will not ride my motorcycle in a reckless or dangerous manner or do anything that may endanger other road users.
- I will not ride my motorcycle if I have consumed alcohol or other drugs.
- If riding as a pillion I will bear in mind the safety of other riders and pillioners.
- I understand that motorcycling has certain inherent risks. Although GIRLS RIDE OUT INC will provide me with appropriate direction and will endeavour to minimise my exposure to the risk of harm, these inherent risks are beyond the control of GIRLS RIDE OUT INC. its volunteers and members.
- I authorise GIRLS RIDE OUT INC or any member or volunteer of GIRLS RIDE OUT INC, to arrange emergency medical assistance / evacuation services on my behalf and at my cost, should it become necessary in the event of any injury or illness suffered by me.
- Whilst participating in any riding activity, I will ensure that I attend with the appropriate personal safety gear.

I release and indemnify GIRLS RIDE OUT INC, its members, volunteers, servants and agents from and against all actions, claims, costs, expenses, and demands in respect of any injury, death, loss or damage to property resulting from my participation in any event. I confirm that I have read and understood the contents and implications of this waiver of liability, assumption of risk and indemnity clause.

Signed: _____ Dated: _____
 (by all Applicants or parent/guardian if under 18 years old)

OFFICE USE ONLY

Received: \$ <input type="text"/>	Received By: <input type="text"/>
Membership Officer Approval (Signature)	
Membership Pack Sent (Date)	
DIRECT DEPOSIT : Member First Credit Union, BSB 802-091, A/C # 202712, Account Name : Girls Ride Out Inc.	