



# Bicycle Wagga Wagga Inc.

(incorporated under the Associations Incorporation Act 2009)  
PO Box 5789,  
Wagga Wagga NSW 2650

www.bww.org.au

## Application for Membership

I, ..... of  
First Name/s Last name

Postal address: .....

City: ..... State: ..... Postcode: .....

E-mail address: .....

Telephone: ..... Mobile: .....

I hereby apply to become a member of the Bicycle Wagga Wagga Inc. In the event of my admission as a member, I agree to be bound by the constitution of Bicycle Wagga Wagga Inc. for the time being in force.

As a participant in any Bicycle Wagga Wagga Inc. activity I am fully aware that I may be exposing myself to a risk of harm and by signing this form I agree to accept full responsibility to prevent putting myself, my fellow participants and any others into danger by riding in a safe and responsible manner and I agree to obey all Australian Road Rules and all reasonable directions from the Bicycle Wagga Wagga Inc. Ride Leader. All riders under the age of 16 must be accompanied by a cycling adult carer.

.....  
Signature of applicant or guardian if applying for junior membership Date

**Membership required:** Ordinary \$20  Junior \* \$0  \* Junior membership is only available to people under 18 years of age.  
Date of Birth:.. .....

I have paid the appropriate application fee by cash/cheque/direct deposit reference .....  
BWW Banking Details: BSB **032-769** Account Number **133810**

I, .....  
(name of nominator)  
an ordinary member of Bicycle Wagga Wagga Inc. nominate the applicant, who is personally known to me, for membership of Bicycle Wagga Wagga Inc.

.....  
Signature of nominator Date

Approved / Rejected by the committee of Bicycle Wagga Wagga Inc. on .....

Receipt Number: ..... Date: .....

I certify that .....  
(name of applicant)  
is a provisional member of Bicycle Wagga Wagga Inc. whose application for membership is yet to be approved by the committee of Bicycle Wagga Wagga Inc.

.....  
Signature of nominator Date