

**FAMILY BUSHWALKERS INC.**

# APPLICATION FOR MEMBERSHIP 2009-10

*Our membership year is 1 October to 30 September. For entirely new members, you will receive 15 months membership on a pro rata basis if you join after 1 July and before 1 October. You may apply for single or family membership **but only children under the age of 18 can be included in a family membership.** Please fill in your details below.*

I wish to apply for membership in Family Bushwalkers Inc., and enclose the fee indicated. The type of membership and names of the family members to be covered by this membership are given below.

I agree to read the 'Information for Members' published in the current *Walks and Social Program* and to abide by the 'Rules for Walkers' outlined therein. I acknowledge that I will be taking part in Family Bushwalkers activities in a voluntary capacity and do so at my own risk.

I enclose my membership subscription as shown below.

**Please mark one box:**                      Single \$20                      Family \$30

**Please mark one box:**                      Renewal                      New member

I have the following skills which I am willing to share with the Club (Please circle):

**Navigation    Leadership    First aid    Other skills:**

GIVEN NAMES	FAMILY NAMES	Age of children (under 18)

**Postal address**

**Home phone**

**Work phone**

**Mobile phone**

**e-mail address (for urgent communications)**

Do you wish to receive future programs by *e-mail* or by *post*? (Please circle one)

**SIGNATURE**

**Date**

Please send the completed form and payment by cheque (to Family Bushwalkers Inc) or postal/money order or cash to:

**The Secretary, Family Bushwalkers Inc., PO Box 247 KIPPAX, ACT 2615**