

North Eastern Tasmania Field Naturalists Club Inc. (NETFNCI)
MEMBERSHIP FORM

Name

Name of family members.....

Residential Address

Postal Address

Phone.....

Email address

Emergency contact

Membership Category Individual \$20 Family [list family members] \$30

Payment by EFT: Account name: N-E Tasmanian Field Naturalists. Bsb 633 000 Acct: 128381860. Your name as reference on transaction.

Send form to the secretary brooker@vision.net.au

Payment can also be made by cash at an activity or meeting.

Details of existing medication or disability that could be of concern on a NETFNCI activity:

.....

I acknowledge, accept and agree that:

1. By participating in club activities I may be exposed to risks that could lead to injury, illness, death or loss or damage to my property;
2. To minimise those risks I will endeavour to ensure that any club activity in which I participate is within my capabilities and that I will carry food, water and equipment appropriate for it;
3. I will advise the activity leader before leaving on the activity if I am taking any medication or have any physical or other limitation that might affect my safe participation in that activity;
4. I will make every effort to remain with the rest of the party during the activity;
5. Activity leaders are volunteers only and may have no first aid expertise;
6. I release the club, its officers, activity leaders and members from any legal liability for any injury to myself or any person associated with me (including death and injury to and loss of property) whether that is caused by negligence or otherwise of any one or more of them.

Signature (applicant 1) Date

Signature (applicant 2)Date

