

MEMBERSHIP DETAILS

Club: _____

New Member Current CA BMXA MTBA Member #:

First Name: _____ Surname: _____ Gender: Female Male

Phone: _____ Mobile: _____ Date of Birth: / /

Address: _____

Suburb: _____ State: _____ Post Code: _____

Email: _____

Emergency Contact Person & Number: _____

MEMBERSHIP TYPE

All Discipline Race Membership** (AC + Club)

- U8 (Age 2-7) 12 Month \$50*
- U13 (Age 8-12) 12 Month \$75*
- U 19 (Age 13-18) 12 Month \$120

Note:
 * Prices do not include club fees.
 ** Compulsory to join a club.

Lifestyle Membership** (AC + Club)

- U13 (Age 8-12) 12 Month \$50*
- U 19 (Age 13-18) 12 Month \$50*

Lifestyle Membership (AC Only)

- U13 (Age 8-12) 12 Month \$75*
- U 19 (Age 13-18) 12 Month \$75*

APPLICATION

I hereby make application for membership with AusCycling (AC) Limited and agree to abide by the rules and regulations and understand the Membership Conditions available on the AusCycling website: <https://auscycling.org.au/page/about/governance-rules-policies>. I recognise AusCycling as the National Sporting Organisation (NSO) for cycling in Australia.

Print Name: _____ Signed: _____ Date: _____
(Signed by Guardian if under 18 years of age)

PAYMENT DETAILS – To be filled out by Club Officer

AusCycling Fee (as above) \$ _____
 Club Fee \$ _____
TOTAL FEE DUE \$ _____

Please include your AK transaction reference.

Electronic Funds Transfer Details
Bank: Commonwealth Bank
Name: AusCycling Limited
BSB: 063-171 **Account Number:** 11 229 997

Reference: _____

Certification by the Club Secretary

I certify that the applicant has been accepted by the club as a member and that proof of the applicants' date of birth has been sighted.

Signed: _____ Date: _____

Please email the completed form to membership@auscycling.org.au.