



FMR Inc.

Postal address: PO Box 296, STONES CORNER, QLD. 4120.

E-mail: fmrqld@gmail.com

WWW URL: <http://www.fmrqld.bwq.org.au>

New Membership Application 2011-2012

Name:

Address:

..... Postcode:

Home ph: Mobile:

Email:

Emergency Contact details:

Name:

Relationship:

Phone:

FULL YEAR MEMBERSHIP (1st July 2011 - 30th June 2012) Cost \$30

Acknowledgement of Risk

I acknowledge that when I am participating in any activity of the FMR Inc. I am doing so voluntarily in all aspects and as such I accept all responsibility for loss of property or bodily injury to me, however it may occur.

I acknowledge that my participation in this activity may expose me to hazards and risks that could lead to injury, illnesses, death or to loss of or damage to my property. In particular when participating in abseiling or above the snowline activities I may be exposed to additional hazards and risks.

I will make all reasonable effort to avoid or minimise these risks by:

- only participating in activities within my capabilities,
- carrying food, water and equipment appropriate for the activity, and
- advising the leader if I am taking any medication or have any physical or other limitation that might affect my participation in the activity.

I acknowledge that the payment of my membership subscription will be deemed as full acceptance and understanding of the above.

Applicant's signature: Date:

METHOD OF PAYMENT

Please post the completed membership application form to the Treasurer at above address including cash, cheque or Australian money order made out to FMR Inc. OR email form and transfer fee online to:

BOQ

BSB: 124001

A/c: 90376340

A/c Name: FMR Inc

Ref: Your initial and Surname (eg. ABrown)

Office Use only

Receipt No.

Treasurer

Committee

Membership Officer

to record payment

to accept application

add to membership list and archive