ULITARRA CONSERVATION SOCIETY INC (Coffs Coast Bushwalkers)
APPLICATION FOR MEMBERSHIP/RENEWAL OF MEMBERSHIP

LAST NAME _______________________________________ TITLE ________

GIVEN NAMES ____________________________ DOB (optional dd/mm) _____

ADDRESS _______________________________________________________

TOWN ______________________________STATE_______ PCODE__________

TELEPHONE   H: _______________ W: _______________   M: ______________

EMAIL: ___________________________________________________________

LIABILITY WAIVER DECLARATION
In voluntarily participating in any activity of The Ulitarra Conservation Society Inc. I am aware that
this may expose me to risk that could lead to injury, illness, death and loss of or damage to my
property. Those risks may include but are not limited to slippery and/or uneven surfaces, rocks
being dislodged, falling at edges of cliffs or drops or elsewhere and risks associated with crossing
creeks. I also acknowledge that I may encounter weather conditions that could lead to hypothermia,
heat exhaustion and being in locations where evacuation for medical treatment may take some
considerable time. To minimise these risks I will endeavour to ensure:

Any activity in which I participate is within my capabilities
I am carrying food, water and appropriate equipment for the activity
I will advise the activity leader if I am taking any medication or have any physical or other
limitations that might affect my participation in the activity
I will make every effort to remain with the rest of the group during the activity and notify the
leader if I need to leave the party for any reason
I will advise the leader of any concerns I am having
I will comply with all reasonable instructions of club officers and activity leader(s)

I have read and understand these requirements. I have considered the risks before choosing to sign
this acknowledgement and I still wish to participate in the activities of The Ulitarra Conservation
Society Incorporated. I accept that any contract arising from my participation will exclude any
liability arising from the supply of goods and services by the club leaders. I will take responsibility
for my own actions and acknowledge by signing this form and the payment of my subscription will
be deemed full acceptance of the above.

ANNUAL MEMBERSHIP DUE 1 JANUARY ANNUALLY
Single $20.00                                                    Couple $30.00
Single Retiree or Pensioner $15.00                    Retired or Pensioner couple $20.00
Temporary members (day visitor – must sign acknowledgement of risk form) $5.00

Payment options – Cash or Cheque (payable to Ulitarra Conservation Society Inc.)
Deposit – BCU;   BSB 533-000   Member No. 42811   (Reference - initials and surname)

Signature ____________________________

Date________________________