

Membership Application Form

Please complete the following membership form and return to the Esperance Cycling Club secretary at espcyclingclub@gmail.com

First Name	
Surname	
Date of Birth	
Address	
Postal address	
(if different from above)	
Email	
Phone number	
Club memberships are for one calendar year 1 st January – 31 st December	
Individual - \$30	
In consideration for my participation in the cycling activities of the club I acknowledge the	
inherent risks in cycling as a recreational pursuit. I hereby release the Esperance Cycling Club	
Inc, including its officials and helpers and hold it blameless for any and all liability for any injury,	
loss and damage sustained whilst participating in club organised activities and events.	
Signature:	
	
Fee Enclosed:	Date
Payment to Esperance Cycling Club Inc **Please note new account details	
PSP 026 150 Account Number 277002 Please put your surname in the EET transmission	

BSB 036 150 Account Number 277093 Please put your surname in the EFT transmission. Email membership application to espcyclingclub@gmail.com or post to PO Box 1789, Esperance WA 6450

The objectives of the Esperance Cycling Club Inc are:

To promote interest in cycling in Esperance and surrounding district To develop cycling within the Club through education, training and coaching to provide a pathway into organised racing

