



**PIONEER MOTORCYCLE CLUB INC.
2017 CLUB MEMBERSHIP / RENEWAL FORM**



I/We hereby apply for a NEW/RENEWAL Club Membership to the **PIONEER MOTORCYCLE CLUB Inc** as a **CLUB MEMBER/S** agree to abide by the rules laid down in the **PIONEER MOTORCYCLE CLUB Inc** Constitution.

Name (1) _____	Name (2) _____
Name (3) _____	Name (4) _____
Address _____	
Suburb _____	Post Code _____
Town/City _____	Phone No. _____
Mobile # _____	Email _____

PLEASE NOTE: For Family Membership, all must reside at same address, please list all names, a separate membership card will be issued per member list above, the **PIONEER MOTORCYCLE CLUB Inc.** current membership expires on 31st December 2017.

FAMILY AND INDIVIDUAL PIONEER CLUB MEMBERSHIP: \$35.00

I agree to indemnify the **PIONEER MOTORCYCLE CLUB Inc.** in permitting me to take part in their Moto-Trials at all location, against all actions, claims on form owners, or any other body affected by my participation in the club event. I take full responsibility for the machine/s I have entered and declared that it is in a condition that will enable safe participation in Moto-Trials. I will abide by any rules as set down by the **PIONEER MOTORCYCLE CLUB Inc.** Committee, the Organiser of the event, at briefing prior to the start of the event and any instruction issued to during the event.

The Motorcycle helmet and or a minimum of boots with a steel reinforced sole, boots that I wear for all events are of an acceptable standard and are in good condition and a good fit. I understand that racing of any sorts at Moto-Trial events is not permitted. I agree to wear long trousers, long sleeved shirts, along with gloves are recommended at all events.

I agree to have my name listed on the **PIONEER MOTORCYCLE CLUB Inc.** Membership list that may be circulated to all members for the convenience of forwarding information of Moto-Trial interest. This consent is given in accordance with the Privacy Act 1993. For local Moto-Trial events the age of the competitors is not a consideration but it is expected that all riders are able to lift their machines from the ground and restart the trials bike without assistance or be under the supervision of their parent's or guardian.

Payment Details:

Please send this **PIONEER MOTORCYCLE CLUB Inc.** Membership application form and a Cheque to:
PIONEER MOTORCYCLE CLUB Inc.
23g Walkers Road
Lyttelton, 8082.

Pioneer Motorcycle Club Bank details:

Westpac Canterbury Centre, Account Number 03-1592-0094585-00
PLEASE MAKE SURE YOU INCLUDE YOUR SURNAME AS REFERENCE.

Name (1) _____	Signature _____
Name (2) _____	Signature _____
Name (3) _____	Signature _____
Name (4) _____	Signature _____

IF UNDER THE AGE OF 16, A PARENT/GUARDIAN MUST SIGN ON THAT CLUB MEMBERS BEHALF