



Townsville Road Runners Inc

Running Townsville for over 50 years

1. YOUR DETAILS (please print clearly in capital letters)

First Name : * Surname : *

Street Address : *

Suburb : * Postcode.....

Telephone : * (Home) (Work) (Mobile)

Email Address : * [] Male* [] Female*

Date of Birth * (DD/MM/YYYY) :/...../..... Age at 31/12/2020 Years #
* Mandatory for computer data base, age categories and insurance etc # TRR Club Championship age is from 31 December 2020

Emergency Contact Phone

2. DECLARATION AND SIGNATURE

Please refer to reverse side for Declaration and Waiver

Applicant's Signature : Date :
(Signature of parent/guardian if under 18)

Please note : Townsville Road Runners requires members to volunteer at least twice during the season for roster at either fun runs or weekly runs. Please ensure that you sign on to the volunteers' duty roster when registering your membership

3. MEMBERSHIP TYPE (Please select from categories below)

- | | |
|--|--|
| <input type="checkbox"/> Adult \$65.00 | <input type="checkbox"/> ***Junior (10 yrs-17 yrs) \$30.00 |
| <input type="checkbox"/> Walker \$55.00 | <input type="checkbox"/> Family \$160.00 |
| <input type="checkbox"/> Full-time Student \$55.00 | <input type="checkbox"/> Life Member \$Nil |

*** Any Junior wishing to run in long runs requires the President's permission

* ** President's approval is required for any Junior under 10 yrs

4. PAYMENT DETAILS

Payment by : [] Credit Card [] Cash [] Cheque (payable to Townsville Road Runners Inc)

Credit Card Details : [] Visa [] Mastercard Amount : \$

Credit Card number : Expiry Date : ___ / ___ CCV

Name of Card Holder : Signature
(please print clearly)

ANQ DECLARATION

I hereby make application for membership of Athletics North Queensland Incorporated with the Club listed on this registration form and declare that I am eligible to participate in competition according to the eligibility laws set down by the By Laws of Athletics Australia. I agree to abide by all the Rules and By Laws of Athletics North Queensland, Memorandums, Articles and By Laws of Athletics Australia and Constitution and Rules of the International Association of Athletic Federation as amended from time to time. (Copies of all Rules & Regulations of AA, IAAF, etc. can be sighted at the office of Athletics North Queensland upon request). I consent to undergo drug testing under the auspices of ASADA. I consent to my name and/or image being used in publications, displayed on the website/social media sites of Affiliated Clubs, Athletics North Queensland, Queensland Athletics and Athletics Australia.

TRR DECLARATION

Knowing that running and walking are potentially hazardous activities, I enter all Townsville Road Runners Club Inc. walks, runs, races and associated events certifying that I am medically able and properly trained to compete. I also assume any and all other risks associated with participating in these events including, but not limited to falls and contact with other participants and objects.

Knowing these facts and in consideration of your acceptance of my online membership form and payment, I hereby for myself, my heirs, executors, administrators or anyone else who might claim on my behalf, indemnify and covenant not to sue, and waive, release in discharge Townsville Road Runners Club Inc., the Townsville Running Festival and Athletics North Queensland and their officers, organisers, servants, agents, contractors, volunteers, medical and paramedical personnel, the owners, licensees and occupiers of land upon which events or parts of events are conducted, all instrumentalities, cities, state or council where an event is held, and all sponsors of all liabilities, claims, damages, cost or expenses which I may have against them arising out of or in any kind of nature whatsoever, foreseen or unforeseen, known or unknown.

I consent to receiving any medical treatment including ambulance transportation that the event organisers think desirable during or after the event.

I consent to Townsville Road Runners Club Inc., the Townsville Running Festival or Athletics North Queensland and event organisers using my name, image and/or likeness before, during or after the event for event promotional broadcasting or reporting purposes in any media including websites.

I understand that compulsory insurance cover affected for participants in these events may not cover me for any or all injury, loss, damages or costs sustained by me.

I consent to undergo drug testing if requested under the auspices of ASADA.

Signed

Date