



## TAMBORINE MOUNTAIN TRIATHLON CLUB INCORPORATED

16 Beacon Road, North Tamborine, QLD  
P.O. Box 229, North Tamborine QLD 4272  
info@tmtc.com.au  
www.tmtc.com.au  
ABN 83 183 862 076

# MEMBERSHIP RENEWAL FORM 2022 - 2023

Rod Routh - Membership Officer 0400 456350  
Mikaela Fair - Head Trainer - 0417 608700

FOB NO: \_\_\_\_\_ Date: \_\_/\_\_/\_\_\_\_

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: Home: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Occupation: \_\_\_\_\_

Emergency Contact: Name: \_\_\_\_\_

Phone: \_\_\_\_\_

**ANNUAL RENEWAL FEE: \$40**

**Casual visits \$5.00 per visit**

**3 months \$110.00**

**6 months \$200.00**

**12 months \$360.00**

**Preferred method of payment is bank transfer as follows:**

**A/c name : Tamborine Mountain Triathlon Club (or just enter TMTC)**

**Direct payment to Westpac BSB 034682 Account 114122 (include your name)**

**CONDITIONS OF MEMBERSHIP – PLEASE READ CAREFULLY AND SIGN**

1. By becoming a member of the Tamborine Mountain Triathlon Club, I am stating that I have read, agree to and will abide by the rules of the T.M.T.C
2. I agree to sign the register and pay my \$5 donation each visit (or pre-paid fee).
3. I agree to keep my membership details up to date and pay my annual fee on time.
4. I understand that if I am over 45 or have not exercised for 12 months and or have an existing medical condition, that I am strongly advised to obtain a “clearance for exercise” from a medical doctor before engaging in any exercise programme.
5. I acknowledge that if I compete in triathlon events this financial year I will need to become a full member of Triathlon Australia at an additional fee of \$145.00.
6. Failure to follow conditions 1 to 5 could lead to membership suspension.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Fob # \_\_\_\_\_ ( see printed No. on Fob)

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**LEGAL DECLARATION:** Tamborine Mountain Triathlon Club Inc. also known as T.M.T.C.

In consideration of the acceptance of membership, with the Tamborine Mountain Triathlon Club (T.M.T.C.) with the aim of using the T.M.T.C. clubhouse facilities at 16 Beacon Road I, for my heirs, executors and administrators, release and forever discharge the T.M.T.C. committee, inclusive of the President, Vice-President, Treasurer, Secretary, Membership Officer all other Office bearers, participating trainers and its servants and agents of all liabilities, claims, damages, costs or expenses which I may have against them arising out of, or in any, of the above parties.

I hereby acknowledge that I have sole responsibility of my personal possessions.

I hereby certify that I have not participated in a fitness appraisal at the Tamborine Mountain Triathlon Club and do not hold this organisation responsible for any personal injury, loss or damage which may occur as a result of my attendance at the Tamborine Mountain Triathlon Club. I hereby acknowledge that his declaration is for the complete duration of my membership.

Print name:

Signature:

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Date:

Contact Number:

OFFICE USE ONLY: Date: \_\_\_\_\_

RENEWAL: YES OR NO.

MEMBERSHIP EXPIRY DATE \_\_\_\_\_

MEMBERSHIP NUMBER: \_\_\_\_\_

AMOUNT PAID \$ \_\_\_\_\_