



CENTRAL RODEO COWBOYS ASSOC INC.

MEMBERSHIP APPLICATION FORM FOR 2018

PO Box 1224
31 Stanley Street
Rockhampton Qld 4700

Phone: 0749 271910
Fax: 0749 271909
www.centralrodeo.com.au
Email: crca12@bigpond.net.au

I, (name) (Jnr. D.O.B.)

of (address) City..... (Postcode)

Phone/Fax.....

(Email)

hereby apply for (please tick one)

- Open Competing Membership.....\$170.00
- Ordinary Membership.....\$170.00
- Senior Bond..... \$130.00
- Junior Membership.....\$40.00
- Junior Bond.....\$30.00
- Junior Permit.....\$170.00
- Associate Membership.....\$40.00

Please note - that for Junior Competitors to compete in Open or Rookie events that they must hold a Junior Permit.

Were you a member last year ?.....

If yes, membership number.....

GST INCLUSIVE

I DECLARE THAT I HAVE READ AND UNDERSTAND THE FOLLOWING STATEMENTS:

A. The management Committee shall have the right to refuse application for membership without assigning and reason to the refusal. Every applicant accepted for membership shall be deemed to agree to pay the annual subscription fee and other fees and charges as prescribed in the Rules of the Association and the By-Laws of the Association and shall be bound by such Rules and By-laws. **I understand that I must phone Central Entries to nominate my entry for Rodeos and that I must pay my nominations before the commencement of the Rodeo.**

B. I acknowledge that I am going to participate in Rodeo events, which are potentially hazardous to my health and well being. I further acknowledge that I chose to participate in these events at my own risk.

Signed (by the applicant)this.....day of (month).....(year).....

PLEASE COMPLETE THE FOLLOWING IF THE APPLICANT IS UNDER 18 YEARS OF AGE.

I, (parent or guardian) hereby consent to this applicant competing in Junior, Rookie and Open events. (delete options that are not applicable)

Signature.....Date.....

Please enclose cheque or monies payable to C.R.C.A. Inc., to the above address for your membership fees with this application. On approval of your application a membership card and receipt will be issued. If your application is rejected your money will be refunded

DIRECT BANKING DETAILS: NAB: BSB: 084901 ACCOUNT: 047810254

METHOD OF PAYMENT: CHQ C/CARD DIRECT DEBIT CASH

PLEASE TURN OVER IF YOU ARE ELIGIBLE TO COMPETE AS A ROOKIE COMPETITOR

Tick Rookie events you are eligible for and wish to compete in.

Bull Ride <input type="checkbox"/>	Team Roping Header <input type="checkbox"/>
Saddle Bronc <input type="checkbox"/>	Team Roping Heeler <input type="checkbox"/>
Bareback <input type="checkbox"/>	Barrel Race <input type="checkbox"/>
Steer Wrestling <input type="checkbox"/>	Breakaway <input type="checkbox"/>
Rope & Tie <input type="checkbox"/>	

To be completed if you wish to compete as a Rookie competitor with CRCA
 As of the 1st January 2018 what is your status with other Rodeo Associations?

	ROOKIE	OPEN	RODEO ASSOC
Bull Ride.....
Saddle Bronc.....
Bareback.....
Barrel Race.....
Breakaway.....
Steer Wrestling.....
Rope & Tie.....
Team Roping Header....
Team Roping Heeler.....

OFFICE USE ONLY: Date..... Membership no.....

Received by..... Receipt no.....

Amount Membership \$..... Amount Bond \$.....

**NATIONAL
RODEO COUNCIL of
AUSTRALIA LIMITED**



Telephone: (02) 67373 777
Fax: (02) 67373 676
Office: Bluff River Rd, Sandy Flat
All Correspondence to: PO Box 463
Tenterfield NSW 2372

ABN: 56 056 100 531

enquire@nationalrodeocouncil.com.au

Release and Waiver of Public Liability Exposure
(Not relating to Personal Accident Insurance)

RODEO and associated events are DANGEROUS RECREATIONAL ACTIVITIES

I understand and acknowledge that rodeo and associated events are inherently dangerous recreational activities. In addition animals can act in a sudden and unpredictable changeable way, especially if frightened or hurt.

I understand and acknowledge that serious **INJURY** or **DEATH** may result from rodeo or associated activities and events.

I agree that: I PARTICIPATE AT MY OWN RISK and that the National Rodeo Council of Australia Ltd ("NRCA") and their Directors, Member Associations, Affiliated Committees, Schools, Members, Officers, Officials, Stock Contractors and Employees shall not be liable for my personal injury, pure economic loss, nervous shock or damage occasioned to me or any loss or damage occasioned to any of my possessions whether such liability arises out of any express or implied term of my participation in an event organised by member associations or affiliated committees or at common law or in any other way.

I agree: Not to drink alcohol or take drugs prohibited by law before or during this event; To immediately advise the Organiser of any injury to myself or the animal I use or which is provided for my use during this event and the manner of the occurrence of such injury;

Conduct

I agree: To control myself and the animal I use or which provided for my use during the event in a proper and reasonable manner and in particular to participate in a manner acceptable to the event. To pay due regard to the safety of all other participants involved in the event and to follow the rules and directions of the organisers and that any misconduct or refusal by me to follow any direction of the organisers will result in the **CANCELLATION** of my participation in the event.

Name of Participant and/or Legal Guardian: _____

Address: _____ State: _____ Postcode: _____

Telephone: _____ Date of Birth: ___/___/___ Occupation: _____

Email: _____

Effect of This Document

I understand that my signature to this document constitutes a complete and unconditional release of all liability of the NRCA, their Member Associations, Affiliated Committees, Members, Officers, Officials, Stock Contractors and Employees to the greatest extent allowed by law in the event of my and/or the children under my care, suffering property damage, injury or death effective for one year from the date of signing below. I acknowledge that I am competent and fully aware of the contents of this document, that I am not affected by any intoxicating liquor/drug at the time of signing it and that I am signing it of my own free will without any threat or promise of inducement being offered by the National Rodeo Council of Australia Ltd. and/their agents.

Dated: ___/___/___

(signature of participant / legal guardian)

(WITNESS- Rodeo Secretary)

**Please note unless this form is completed in full, you will be
unable to participate in any NRCA sanctioned event.**

*The National Rodeo Council of Australia uses personal information collected from you to fulfill your membership. We may also use this information to inform you of future special offers/promotions. Your information will only be disclosed to reputable companies who plan to inform you of these offers or as otherwise allowed under the Privacy Act of 1988. If you would like to access this information, please contact the National Rodeo Council's Privacy Officer at: NRCA on 0267 373777.

Please tick if you do not wish to receive any future offers by mail.