



Mountain Bike Australia
Code of Conduct – Individual Agreement Form

I, (full name) _____

of (address) _____

Email: _____

MTBA Member No: _____

Am seeking accreditation / re-accreditation (circle one) as an MTBA Commissaire.

I agree to the following terms:

1. I agree to abide by the MTBA Code of Conduct Policy and Member Protection Policy.
2. I acknowledge that MTBA is the training provider responsible for accreditation of Commissaires in the sport of mountain biking. MTBA make take disciplinary action against me if I breach the Code of Conduct.
3. I understand that MTBA is required to implement a complaint handling procedure in accordance with the Member Protection Policy in the event of an allegation against me.

Signature: _____ Date: _____

Return to:
Mountain Bike Australia
PO Box 377
Varsity Lakes QLD 4227
education@mtba.org.au