



## School Affiliation Application

### MTBA AFFILIATION BENEFITS:

1. Insurance cover for weekly supervised school skills/class sessions for all staff and student participants where applicable.
2. One 12-month Recreation Membership for school staff coordinator.
3. School details are included in directory on MTBA website.
4. Welcome pack offering Free Trial membership to all students.
5. Access to Mass Participation insurance cover for student MTB events.
6. Access to MTBA Online Services event entry system.
7. Promotion of School events through MTBA event calendar.

### SCHOOLS CHARTER AGREEMENT:

1. School agrees to adhere to the MTBA Code of Conduct.
2. Group has appointed at least one person who is/are a current members(s) of MTBA to act as the contact person(s) for the school MTB group.
3. Operate on a not-for-profit basis.
4. Attach a letter of endorsement from School Principal / Head of School.
5. Provide MTBA participant details for insurance and welcome pack.  
Data required: Full name, DOB, Guardian Name, Address, Email address

### Affiliation Details

Please Tick **New Affiliation** **Renewing Affiliation** (Current Affiliate ID# \_\_\_\_\_)

Name of School: \_\_\_\_\_

Name of associated Mountain Bike Club (if applicable): \_\_\_\_\_

### Contact Details

(\*Only one Authorised Contact allowed)

\*Authorised Contact: \_\_\_\_\_ Daytime Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Website: \_\_\_\_\_ Email Address: \_\_\_\_\_

### Authorised Contact Person(s) (\*required)

\*Contact person 1: \_\_\_\_\_ MTBA Member #: \_\_\_\_\_ or join as new member

Contact person 2: \_\_\_\_\_ MTBA Member #: \_\_\_\_\_ or join as new member

### School Program Information

What venue/s do you use: \_\_\_\_\_

What school term is the Mountain bike program conducted:  All year  Term 1  Term 2  Term 3  Term 4

What type of program is offered:  Weekly  Sport (inter)  Rec Sport  After-School Other \_\_\_\_\_

Do you wish to establish membership offerings as part of the affiliation? Yes  No

Banking Institution: \_\_\_\_\_ BSB: \_\_\_\_\_

Account Name: \_\_\_\_\_ Account no: \_\_\_\_\_

We hereby make application for membership with Mountain Bike Australia (MTBA) Inc. and agree to abide by the rules and regulations of the MTBA and the Schools Charter. We recognise MTBA as the national governing body and membership organisation of mountain biking in Australia.

Authorised Contact Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Affiliation Fee: **\$185.00 GST Incl.** Payment by:  Cheque (made payable to Mountain Bike Australia Ltd)

Please Tick **Visa** **Mastercard**

Card Number: \_\_\_\_\_

Expiry Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Cardholder Name: \_\_\_\_\_

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

- Electronic Funds Transfer
- Credit Card (details provided)
- Credit Card (details over phone)

**Bank:** Commonwealth Bank  
**Name:** Mountain Bike Australia Ltd  
**BSB:** 064 475 **Account no:** 10375364

**Mountain Bike Australia Ltd**  
ACN 616 027 153  
ABN 31 616 027 153  
PO Box 377 Varsity Lakes QLD 4227  
+61 (07) 5628 0110  
info@mtba.org.au www.mtba.org.au

#### EFT Remittance details

Date Paid: \_\_\_\_\_

Amount Paid: \_\_\_\_\_

Reference: \_\_\_\_\_