



# Membership Application

Membership of the Australian Footbike Association Inc entitles you to the following

- Being kept up to date with all races and other events around the country
- Discounted event entry price
- Discount (5%) on accessories purchased through Kickbike Australia

## Footbike Association Rules

These rules aim to develop Footbiking or Scootering as a fair and safe activity.

1. Members ride scooters that are propelled by kicking or are pushed/carried afoot. In kicking one foot pushes straight backwards on the ground like in running, while the other foot is resting on the scooter footboard. Scooters requiring a different motion are not covered.
2. Scooter construction is free but it may not have a motor, mechanical gearing or sail, nor sharp or protruding parts causing danger to the rider or other riders.
3. Scooters must have Pneumatic tyres and at least one effective rim or disc brake. Scooters with Skateboard style wheels are not included.
4. An Australian standard approved Bike style helmet but must be worn at all times while kicking. Knee and elbow pads, whilst recommended, are optional.

## Membership details

Membership runs for the financial year starting 1st July to 30<sup>th</sup> June – and is payable by the 1<sup>st</sup> of August of that financial year. Cost consists of a one-off Joining fee \$15.00, plus an Annual Fee for Adults \$40pa, Child (under 18) \$20pa or Family \$60pa –

This annual fee will be pro-rated on a quarterly basis, to tie in with the financial year. If you first join between 1/9 and 31/12 your first year annual fee will be Adult \$30 Child \$15 Family 45. If you first join between 1/1 and 31/3 it will be Adult \$20 Child \$10 and Family \$30. If you join between 1/4 and 30/6, then Adult \$10 Child \$5 and family \$15. From 1/7 annual fee applies.

Lodge to Australian Footbike Assoc NAB BSB 084423 Account 822932552 Ref: your name  
Return completed form and payment details to P O Box 448, Narangba, QLD 4504.

### MEMBERSHIP FORM

Name ..... Gender..... DOB .....

Address .....

Suburb ..... State ..... Post Code.....

Phone..... Mobile..... email.....

Year of Membership ...../..... Amount paid \$..... Method.....

I acknowledge that I have read and understood the rules.

Name..... Signature..... Date.....

Other Family member – (If more than 1 extra family members, please list them on reverse)

Name ..... Gender..... DOB .....

Office Use	Membership #	Total Paid	Card issued
------------	--------------	------------	-------------