# CLUNKER RIDE 20<sup>th</sup> & 21<sup>st</sup> August 2011

**RULES :** Drum brake front end mandatory, displacement unlimited, modifications encouraged, knobby or slick tyres. Note~ There will be no backup vehicle following the ride to pick up broken bikes, in the event of a breakdown it is your responsibility to arrange retrieval of your

up broken bikes, in the event of a breakdown it is your responsibility to arrange retrieval of your bike and equipment. Try some Rossi boots, Golden Breed jumpers, open face helmet, flying goggles, Belstaff jacket or Dririder wax cotton, denim, anything from 70<sup>s</sup> or 80<sup>s</sup> should look silly enough.

# STARTING POINT: To be advised

Note ~ The starting point / campsite and ride will be on private property and will be signposted from that point. (I think) You need to make arrangements to get to the starting point yourself. Trailride is leaving the campsite SAT 21<sup>st</sup> August at 8.30AM Sharpish There is no access to the property other than that requested from and permitted by the owners.

**<u>FINISHING POINT</u>**: Afternoon, Sunday 21<sup>st</sup> of August at the same place.

**SWAGS etc:** Bring whatever you need with you.

WATER AND FUEL: Water to be carried by each rider. Fuel is included. 2 stroke oil is not.

NOTE ~ 1<sup>ST</sup> fuel stop is a minimum 20KMS.

**FOOD & DRINK:** This is an all inclusive ride ~ Includes Sat Brekky, Lunch & Dinner, Sun Brekky & Lunch and all refreshments. (Beer, water and soft drink, <u>no spirits supplied</u> but you can bring your own.) including fuel.

JUNIORS: MUST BE ACCOMPANIED BY AN ADULT, Adults must have a sense of humour !

**ENTRIES CLOSE**: TUESDAY, 16<sup>th</sup> of August at the clubhouse. Entries can be left at the CLUBHOUSE Tuesday nights, or by e-mail ~ silvercitymcc@bigpond.com or fax 0880873007, in any event payment is to be made by the closing time. Indemnity forms must be signed and nomination to be paid in full or entry may be refused.

# RIDERS MUST BE A FINANCIAL MEMBER OF THE SCMCC.

-----Keep the top bit so ya know where to go, return the bottom with payment------

# INDEMNITY FORM – PLEASE READ AND SIGN, include payment with form CLUNKER RIDE 20<sup>th</sup> & 21<sup>st</sup> August 2011

I, THE UNDERSIGNED SHALL NOT HOLD THE SILVER CITY MOTORCYCLE CLUB, ITS ORGANISERS OR MEMBERS OR ALL PROPERTY OWNERS INCLUDED IN THIS TRAIL RIDE, RESPONSIBLE FOR ANY INJURY OR DAMAGE INCURRED TO ME OR MY EQUIPMENT WHILE PARTICIPATING IN THIS SOCIAL RIDE. I ALSO UNDERSTAND THIS RIDE IS NOT A COMPETITION, SOME SECTIONS MAY BE PUBLIC ROADS, AND I AGREE TO RIDE AT A SAFE AND REASONABLE SPEED. I HOLD A MOTORCYCLE LICENCE AND MY VECHILE IS REGISTERED AND INSURED.

All Members are reminded that Trail Riding Is Not A Race and Participants Are To Ride at Their Own Pace.

Rider Name:		Signature:
Address:		
Phone No:		E-mail :
Parent/Guardian signature	& Name if under 1	18:
Ambulance/Health Insuran	ce Cover Provider	:
Emergency Contact Name	& phone number:	
Amount included:	<u>SENIORS</u> : \$150.00 [	☐ <u>JUNIORS</u> : \$100.00 □
Financial Member of SC You must be a financial men to participate in this trail r	nber	<b>No</b> □ (must fill out membership form and pay fee to join SCMCC. At clubhouse most Tuesdays, 7.30 pm)
Membership Type: Se	Ŭ	Junior ion form per rider



## **PARTICIPANT DECLARATION**

**WARNING!** THIS IS AN IMPORTANT iv) that track or event conditions may be DOCUMENT WHICH AFFECTS YOUR LEGAL RIGHTS AND OBLIGATIONS. PLEASE READ IT CAREFULLY AND DO NOT SIGN IT UNLESS YOU ARE SATISFIED YOU UNDERSTAND IT.

## 1. I THE UNDERSIGNED (see below):

Insert Name of entrant

HEREBY AGREE that I am by this agreement entitled to participate in the motorcycle activity/meeting listed in Schedule 2 (hereinafter called "the Meeting" or the "Event") at the venue listed at Schedule 3 (hereinafter called "the Venue") on the terms and conditions set out in this document. DEFINITIONS

- 2. In this declaration:
- a) "Claim" means and includes any action, suit, proceeding, claim, demand, damage, cost or expense however arising including but not limited to negligence but does not include a claim against a Motorcycling Organisation or Club under any right expressly conferred by its constitution or regulation;
- b) "Indemnitees" means and includes the persons, organisations and bodies corporate whose names appear in Schedule 1.
- c) "MA" means Motorcycling Australia Limited;
- d) "State Controlling Body" (SCB) means a state or territory motorcycling association affiliated as a member of MA;
- e) "Motorcycling Activities" means performing or participating in any capacity in any Motorcycling Organisation event, meeting or activity;
- f) "Motorcycling Organisation" means and includes MA, and the MA members (including the SCBs and affiliated clubs) and where the context so permits, their respective directors, officers, members, servants or agents.
- SCMCC means Silver City Motorcycle a) Club Inc. and includes officers, members, servants or agents.

#### **ACKNOWLEDGMENT OF RISKS, DANGERS & OBLIGATIONS**

- 3. I ACKNOWLEDGE that:
- a) motorcycle sport is dangerous and that by engaging in the sport (whether as a competitor, recreational rider, trail-rider, backup driver and passenger/s, coach, official or media) at the Meeting or event I take and am exposed to certain risks and dangers and am under certain obligations as follows:
- i) that I may be injured, physically or mentally, and may be killed;
- ii) that my machinery or equipment may be damaged, lost or destroyed;
- iii) that competitors and/or riders may ride dangerously or with a lack of skill;

hazardous and may vary without warning or predictability;

**CONTRACT TO PARTICIPATE IN THE CLUNKER TRAIL RIDE** 

- that organisers, officials, landowners/track operators and any agents or representatives of those in charge of meetings are frequently obliged to make decisions under pressure of time/or events;
- vi) that any policy of insurance of or in respect of my life or physical or mental health may be voided;
- vii)that there may be no or inadequate facilities for treatment or transport of me if I am injured;
- vii)that I have an obligation to myself and to others to act safely and within the rules and regulations of MA;
- b) the Indemnitees do not make any warranty that the services at the Meeting / event will be provided with due care and skill or that any materials provided in connection with the services will be fit for the purpose for which they are supplied;
- c) to the extent that any warranty is implied it is excluded to the full extent permitted by law;
- d) have voluntarily read and understood this warning and accept and assume the inherent risks in participating in the Event. WARNING UNDER THE FAIR TRADING ACT

#### 4. Under the provisions of the Fair Trading Act several conditions are implied into contracts for the supply of certain goods and services. These conditions mean that the supplier named on this form is required to ensure that the recreational

- services it supplies to you are: - rendered with due care and skill;
- as fit for the purpose for which they are commonly bought as it is reasonable to expect in the circumstances; and
- reasonably fit for any particular purpose or might reasonably be expected to achieve any result you have made known to the supplier.

Under section 32N of the Fair Trading Act, the supplier is entitled to ask you to agree that these conditions do not apply to you. If you sign this form, you will be agreeing that your rights to sue the supplier under the Fair Trading Act if you are killed or injured because the services were not rendered with due care and skill or they were not reasonably fit for their purpose, are excluded, restricted or modified in the way set out in this form. NOTE: The change to your rights, as set out in this form, does not apply if your death or injury is due to gross negligence on the supplier's part. "Gross negligence" is defined in the Fair Trading (Recreational Services) Regulations 2004. For the purposes of the clause 3, "the Supplier" shall mean and include the Indemnitees.

#### **INDEMNITY AND RELEASE GIVEN TO ORGANISERS**

5.IN CONSIDERATION of the acceptance of me as a participant in the Meeting:

a) I AGREE TO INDEMNIFY AND KEEP INDEMNIFIED to the full extent permitted by law the Indemnitees listed in Schedule 1 and each of them in the following manner:

- i) that I participate in the meeting at my sole risk and responsibility;
- ii) that I accept the Venue as it stands with all or any defects hidden or exposed;
- iii) that I indemnify and hold harmless the Indemnitees, their respective servants, agents, officials and competitors against any actions, costs, losses or claims which may be made by me or on my behalf for or in respect of or arising out of my death or any injury loss or damage caused to me or my equipment whether caused by negligence, breach of contract or in any other manner whatsoever.
- b) I AGREE TO RELEASE to the full extent permitted by law the Indemnitees and each of them from all liability to me for any claim, loss, damage, cost or expense (whether arising under statute, from negligence, personal injury, psychological trauma, death, property damage or infringement of third party rights or otherwise) that arises as a result of any act, matter or thing done, permitted or omitted to be done by me or which is in any way connected with my presence at or involvement in the Event.
- 6. The release and indemnity provided by me in this declaration is in addition to, and will not in any way limit the application of, the conditions of sale attaching to tickets, conditions of entry, nomination form specific to the event, conditions of credentials, or any other applicable terms or conditions in respect of the Event.
- 7. A term of this release and indemnity will not apply where the term contravenes the law of the relevant jurisdiction under which any legal action is legitimately taken however such terms are severable and do not invalidate the remaining terms.
- 8. The indemnity form and conditions stated on the nomination form for the event is included and forms part of this contract. MEDICAL
- 9. I declare that I am and must continue to be medically and physically fit and able to participate in the Meeting. I will immediately notify SCMCC in writing of any change to my fitness and ability to participate. I understand and accept the Indemnitees will continue to rely upon this declaration as evidence of my fitness and ability to participate.
- 10. I acknowledge and agree that if required, the Indemnitees (or any of them) may arrange medical or hospital treatment (including ambulance transportation) for me. I authorise such actions being taken by the Indemnitees and agree to meet all costs associated with such action. I understand it is compulsory for me to have ambulance insurance in some form and I accept responsibility for the cost of ambulance transportation, ambulance cover and further agree to maintain ambulance cover during the term of my license / membership.

# PRIVACY

11. I hereby consent to the collection of my personal information by the SCMCC, MA and the SCB in connection with my involvement at the Event and the use and disclosure of my personal information by

SCMCC, and MA to other agencies and officials associated with the Event for the purposes of conducting and managing the Event. I understand that I may gain access to my personal information held by SCMCC by contacting SCMCC at 100 Thomas Street . I understand that if I do not provide the personal information requested above that I may not be permitted to participate in the Event.

#### PERSONAL HEALTH INFORMATION

12.I hereby agree with SCMCC,MA and the SCB that in consideration for my participation in the Event that SCMCC, MA and the SCB may receive, collect, store and use personal health information about me in the manner set out below:

#### a) I ACKNOWLEDGE that:

- i) If I am injured, become ill or die at or following the Event the party listed at Item 8 in Schedule 1 in addition to any hospital at which I am treated (together "my Carers") will have health related information about me in their possession, power and control relating to me which is subject to obligations imposed by the Privacy Act ("my Information") and the Privacy Act is intended to protect my personal information;
- ii) SCMCC, SCMCC wish to collect my Information for purposes that include their risk management programs, evaluating and improving the safety of SCMCC, MA and SCB events and of the Meeting organisers and facility providers of SCMCC / MA / SCB events, and generally to reduce the risks to persons engaged in motorcycle sport; and
- iii) It is reasonable for SCMCC, SCMCC to collect, store, use and disclose my Information in accordance with clause 12(a)(i) above and in the manner set out in clause 12(b).
- b) IN CONSIDERATION of my acceptance as an entrant in the event / Meeting I consent and agree that SCMCC, SCMCC:
- i) may collect and store any of my Information, including obtain my Information from third parties including my Carers;
- ii) may use any information collected in accordance with this clause for any purpose consistent with creating safer competition in motorcycle sport and events held by or in conjunction with SCMCC, MA, my SCB, or with an SCMCC, MA or SCB permit;
- iii) may disclose my Information to third parties provided such disclosure is reasonably intended to be used for the purpose of improving safety at events held by or in conjunction with SCMCC, MA, or with an MA permit provided any such information is held by SCMCC, MA or my SCB in accordance with the MA Privacy Policy.
- c) I irrevocably authorise SCMCC and hereby appoint SCMCC as my lawful attorneys to collect from my Carers, and I hereby direct 5) N/A my Carers to provide to SCMCC upon request being made by SCMCC, any of my Information including but not limited to any information concerning any incident or event causing or contributing to or resulting from any injury, illness or death to me, the details of any diagnosis and prognosis provided to me by my Carers (or Your Doctor & phone number if known any party with the knowledge of any of my

Carers), and any other matter to the knowledge of my Carers that might reasonably be considered to be requested by SCMCC for the purpose of improving safety at SCMCC, MA and SCB events.

#### POLICIES AND REGULATIONS

- 13.I acknowledge, understand and agree that it is a condition of my participation in the Event that I agree to be bound by, and subject to, the rules, regulations and jurisdiction of SCMCC and MA as amended from time to time. Copies of all MA rules, policies and regulations are available by contacting the MA office.
- 14.All participants are bound by the MA anti doping policy and thus understand they may be subject to drug testing. Testing conducted by the Australian Sports Anti-Doping Authority (ASADA) is in accordance with the ASADA Act and the National Ant-Doping Scheme. This involves the taking of a sample (any human biological fluid or tissue whether alive or otherwise, or any human breath) for the purpose of detecting the use of a Prohibited Drug or Doping Method. Any participant infringing MA's policy or refusing a drug test may be disqualified or otherwise dealt with in accordance with the terms of the anti-doping policy.
- 15. All participants are to acknowledge the pre-ride briefing explaining the gate system, cornerman system or other procedures to be followed during the ride. Trailrides are not races, riders are to ride at their own pace, giving due regard to the prevailing conditions and their own abilities.

#### **EXECUTION**

16.I THE UNDERSIGNED STATE THAT I HAVE READ AND UNDERSTOOD THIS DECLARATION (INCLUDING THE WARNING, INDEMNITY AND RELEASE) AND AGREE TO THE TERMS AND CONDITIONS AS STATED.

NAME of Entrant (PRINT):

SIGNATURE of entrant:

# Date

## SCHEDULE 1. (indemnitees)

- 1) Federation Internationale de Motocyclisme
- 2) Motorcycling Australia Ltd
- 3) Motorcycling NSW Limited
- 4) Silver City Motorcycle Club Inc.
- including members and office bearers
- 6) All Land owners, including staff,
- managers and visitors

7) Club Sponsors 8)

Item 8 includes Royal Flying Doctor Service, Broken Hill Hospital, Ambulance Services, Emergency Services and First **Aid Personnel** 

#### 9) N/A

- 10)All other persons involved in the organisation, conduct and promotion of the Event or construction or location of the facilities used in connection with or otherwise related to the Event
- 11)Each of the respective officers, employees, servants, agents, sponsors, successors and assignees of each of the above.

### SCHEDULE 2: Dates

Starting Saturday 21<sup>st</sup> August 2010 , and finishing Sunday 22<sup>nd</sup> of August 2010.

#### SCHEDULE 3: Location

**CLUNKER TRAIL RIDE** Ride consists of trailriding on formed roads, 2 wheel tracks, off-road sections and / or sealed roads as may be required. Ride starts, overnight camps, and finishes on private property.

#### THIRD PARTY INDEMNITY WHERE **PARTICIPANT IS UNDER 18 YEARS OF** AGE 15. I/WF

NAME Parent or guardian or supervisor (PRINT):

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being the parents or guardians or any other authorised supervisor of the person named in Clause 1 (hereinafter called "the entrant")

## HEREBY ACKNOWLEDGE:

- a) I/we have read the whole of this document and understand it;
- b) I/we consent to the entrant participating in the Event; AND
- C) I/we are aware of the risks, dangers and obligations set out in Clause 3 above;
- d) I/we acknowledge that the entrant is bound by and subject to the rules and policies of MA, including, without limitation, the MA anti-doping policy.
- 16.IN CONSIDERATION of the entrant being accepted as a participant in the Meeting **I/WE HEREBY INDEMNIFY AND RELEASE** the Indemnitees in the same manner and to the same effect as if I/WE were the entrant and agree to personally accept all terms and conditions and obligations set out in this declaration,

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SIGNATURE Parent or Guardian or supervisor

Date