



**DAY RIDE  
REGISTRATION  
FORM**

Complete and fax to **02 9635 5042** or mail to PO Box 3455, Parramatta 2124 or e-mail to **admin@greataustralianbikeride.org.au**  
A separate form is required for each person. Please ensure all information is filled out clearly using block letters.

**PERSONAL DETAILS**

SURNAME ..... FIRST NAME .....

DATE OF BIRTH ..... Phone Mob ..... Home (....) .....  
dd/mm/yyyy

ADDRESS ..... P/code.....

EMAIL ..... Member of .....  
Rotary Club

EMERGENCY CONTACT (not on ride) NAME ..... PHONE .....

Indicate which day you wish to ride, enclose **\$80.00** and return the form.

STAGE ..... DAY & DATE .....

SHIRT SIZES (You will receive one GABR Ride Jersey and one GABR Polo Top)

MENS      **XXXL**     **XXL**       **XL**       **L**       **M**       **S**

LADIES      **24**     **22**     **20**     **18**     **16**     **14**     **12**     **10**     **8**

I enclose the non-refundable registration to cover meal, escort vehicles and clothing

Method of Payment  Cheque/ money order (payable to Australian Rotary Health)    or

Credit Card:    Visa     MasterCard     Amex     Diners

Number:                        

Cardholder's Name: ..... Expiry: ...../.....

Cardholder's Signature: ..... Date .....

**Disclaimer** Persons entering the 2009 The Great Australian Bike Ride must agree to the following:

- I understand that cycling on public roads is a potentially hazardous activity. • I attest that I am physically fit and that my bike will be in a sound mechanical order prior to undertaking the event. • During this event I agree to wear a cycling helmet, abide by the directions of police and event volunteers and ride with care and consideration of others on the road. • I release Australian Rotary Health ABN 52 006 119 964, its servants and agents from all claims for injury, loss or damage of whatever kind I might suffer as a result of any acts or omissions whether negligent or otherwise of ARH, its servants or agents in relation to the event. • I also accept responsibility and release ARH from all liability for claims for damages for injury loss or damage of whatsoever kind by any other person or corporation as a result of any act of omission whether negligent or otherwise on my part. • I declare that I am in good health and mental and physical fitness and am able to meet the requirements of this ride I have also read, understood, and agree to abide by, the Terms and Conditions of entry for the Great Australian Bike Ride as found on the web site [www.greataustralianbikeride.org.au](http://www.greataustralianbikeride.org.au)

Signed ..... Date .....