



Application for Affiliation to WA Endurance Riders Association Inc

Name of Club							
Postal Address							
Contact Name							
Phone Number				Facsimile Number			
Email							
Website address (if applicable)							
Total number of committee members							
President's Name							
Phone Number				Email			
Secretary Name							
Phone Number				Email			
Treasurer's Name							
Phone Number				Email			
Is the club incorporated		Yes <input type="checkbox"/> No <input type="checkbox"/>		If yes, provide incorporation no.			
Number of rides to be conducted during the calendar year							
Number of volunteers registered with the club							
No of people including spectators at biggest ride/ activity							
Does the Club provide any:							
(a) Legal, financial or environmental advice						Yes <input type="checkbox"/> No <input type="checkbox"/>	
(b) Medical treatment (other than first aid), medical advice, scientific or medical research						Yes <input type="checkbox"/> No <input type="checkbox"/>	
(c) Professional services that are provided on a "fee for service" basis (other than tuition)						Yes <input type="checkbox"/> No <input type="checkbox"/>	
Total Assets		\$		Total Liabilities (debts)		\$	
Total Income (grants, memberships, sponsorships)		\$		ABN (if applicable)			
Does the Club have (tick those applicable)				a constitution: <input type="checkbox"/> certified first aid officers <input type="checkbox"/> rules & regulations: <input type="checkbox"/> risk management program <input type="checkbox"/> hot weather policy <input type="checkbox"/> age limits <input type="checkbox"/> compulsory helmet use <input type="checkbox"/> bio-security measures <input type="checkbox"/>			
After enquiry, are the Office Bearers / Committee Members or the Club aware of any circumstance which may result in a claim being made? If yes, attach full details.						Yes <input type="checkbox"/> No <input type="checkbox"/>	
Signed on behalf of Club _____							
Position _____				Date _____			
Return completed form to WAERA Insurance Officer (see WAERA SMC Contact List for contact details). A separate Ride Application must be completed for approval to conduct an endurance ride under the auspices of A.E.R.A. Inc							