



Application for attendance at the BMF/OEG MTB Training Program

Saturday 2nd and Sunday 3rd October 2010

Innabaanya Campsite Majura Road, ACT
and Majura Pines State Forest



Meeting point will be the Innabaanya Campsite on Majura Road ACT, 10.00am. Directions will be sent once registration form has been received.

Instructors are trained professional instructors from the Outdoor Education Group with support from experienced cyclists.

Riders to please bring riding equipment: MTB bike*, spare tubes, pump, helmet, appropriate comfortable riding clothing and any other cycling equipment as required. Additionally, please bring; clothing and personal items, sleeping bag, pillow, towel and eating utensils; mug, plate and cutlery.

*If you require a Mountain Bike there is a limited supply available for hire which would be suitable for beginner riders.

Catering: Saturday Dinner, Sunday Breakfast and Lunch is catered. Please bring Lunch for the first day and snacks. Water bottles are also required (Camelback advised).

11-20 age group recommended however please call 02 4869 6700 if you are over 20 years old and would be able to act in a mentor role. If under 11 years old please again contact us to allow a review of your application.

APPLICATIONS WILL NOT BE ACCEPTED WITHOUT A FULLY COMPLETED MEDICAL FORM – ALL APPLICATIONS DUE BY FRIDAY 17TH SEPTEMBER 2010.

Name _____

Address _____

_____ State _____ Postcode _____

Telephone _____ Mobile _____

Email _____

Level of experience _____

Payment Options:

1. **Cheque** (made payable to **The Outdoor Education Group**), mail to: The Outdoor Education Group, PO Box 682, Moss Vale, NSW 2577

2. **Direct Deposit:** BSB: 063628 A/C No: 10042374 Account Name: The Outdoor Education Group. **You must state: BENMIK followed by the Participant Surname**

Confirmation emails or letters will be sent to you once payment, registration form and medical forms are received.

BMF/OEG MTB Training Program Acknowledgement of Information & Consent Form

As parent/guardian of _____ I confirm that I have read and understood the information from the Outdoor Education Group (OEG)/ Ben Mikic Foundation (BMF) regarding the Mountain Bike Training Program and that I fully understand the nature of the weekend and agree to my child's participation in all the activities described.

I understand that the activities outline may change during the program in response to inclement weather (environmental conditions) and / or other safety concerns.

I understand that the Outdoor Education Group and its instructors take all reasonable care to minimize foreseeable risks whilst overseeing the Program.

I also understand and agree:

1. That the physical demands of the Mountain Bike Skills program require that my child is medically, physically and emotionally fit and fully able to participate in the activities. The program instructors reserve the right to refuse to permit my child to participate in any activity that they deem he / she is not fit to participate in or where he / she is deemed a hazard to themselves, the instructors or other participants.
2. That I have read and understood the information provided regarding this Mountain Bike Training Program and that I will ensure that my child has adequate clothing and equipment to participate safely and comfortably.
3. That my child may be required in exceptional circumstances to obey direct instructions given by Outdoor Education Group instructors. I understand that if my child fails to obey instructions and that, if this refusal places themselves, the instructors or other participants at risk, they may be required to leave the program whereby no fees will be refundable and I will be required to arrange their transport home at my own cost.
4. That I am responsible for the replacement or repair cost of any Outdoor Education Group equipment that is lost or willfully damaged by my child.
5. That it is my responsibility to truthfully and accurately complete and submit the medical forms within the specified timeframe.

CONSENT TO USE IMAGES OR PHOTOGRAPHS

OEG occasionally photographs participants on programs for use in OEG publications, on the OEG website and for use in presentations. We would very much appreciate your consent to take photographs on program in order to promote Outdoor Education.

I consent to my child being photographed and/or visual images of my child being taken during activities, for use in OEG publications, on the OEG website, or for publicity purposes without acknowledgment and without being entitled to any remuneration or compensation.

(Please strike out this paragraph if you do not agree)

NAME OF CHILD: _____

NAME OF PARENT / GUARDIAN: _____

PARENT/GUARDIAN SIGNATURE: X _____

DATE: ____ / ____ / ____