



Club Secretaries: Return this form to your **State Secretary** immediately following the trial ride.

TRIAL MEMBERSHIP APPLICATION FORM

(Restricted to riders who have not held an AVCC licence in the last 5 years and who have not previously had Trial Rides)

Insurance cover and other details for riders taking the trial rides:

- Insurance cover for the rider commences 30 minutes prior to race time and ceases 15 minutes after finishing the race. This is to allow for appropriate warm up and cooling time.
- Insurance cover only applies at the venue of the race involved. That is, does not cover travel from or to the rider's home or other destination.
- The maximum number of rides allowed under the 'trial rides' provision is **two**, but it will be at the discretion of each state body to determine whether they wish to provide Trial Rides.
- A second trial ride has to be taken within **four weeks** of the first ride, and must be taken in same club where the first trial ride was taken.
- Trial rides are only permissible in **Club events** and **no prize-money or trophies** shall be awarded to a trial rider. State Peak Bodies and Clubs may impose additional limitations or restrictions on Trial Rides.

Rider's details:

Surname _____ First Name _____

Address _____

Post Code _____

Email: _____

Tel. No. (Hm) _____ (Wk) _____ (Mob.) _____

In Case of Emergency: Contact Name _____ Ph _____

Date of Birth _____ Name of club where ride(s) taken: _____

I agree to allow officers of the AVCC and affiliates to contact me on cycling business by email or telephone. Yes No

I agree to abide by the rules and regulations of the Australian Veteran Cycling Council

Have you had an AVCC licence in the last 5 years? No Yes (you are ineligible for a Trial Ride)

Have you had a Trial Ride before? No Yes Date of Trial Ride _____ Club where ride taken _____ (you are ineligible if you have already had two Trial Rides, or if this Trial Ride is not taken within four weeks and at the same club as the first Trial Ride)

SIGNATURE: _____ Club Official's Signature: _____

Date of Trial Ride 1: _____ Date of Trial Ride 2: _____