



Education
Licenses Austcycle
Provider
ABN 44586979472
Ph 0411260 336
www.rideability.com.

AUSTCYCLE REGISTRATION FORM

This Consent and Registration Form (**Consent Form**) is to be completed and signed by the training participant (**Participant**). The Consent Form must be received by the AustCycle Teacher before the Participant will be allowed to participate in the training course.

AustCycle Pty Ltd reserves the right to refuse to allow any person from participating in the training course.

Declaration

I have carefully read this Consent Form in its entirety and agree to be bound by the terms printed on the back page of this Consent Form. I acknowledge and accept that the sport of cycling carries a degree of risk of injury. I agree to obey all the AustCycle rules, directions and decisions of all AustCycle Teachers and officials whilst I am participating in the AustCycle Cycling Training course.

Declaration of Participant

I (Participant) have read this Consent Form in its entirety and agree to the conditions for participation in the AustCycle Cycling Training Program.

Participant's signature	<input type="text"/>	Date	<input type="text"/>
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Please note, all data collected is confidential and for evaluation purposes only.

Participant's details:

Name	<input type="text"/>
Postal Address	<input type="text"/>
	Postcode <input type="text"/>
Email Address	<input type="text"/>
Telephone (Work)	<input type="text"/>
Telephone (Home)	<input type="text"/>
Mobile Phone	<input type="text"/>
Age (years)	<input type="checkbox"/> <18 <input type="checkbox"/> 18 - 29 <input type="checkbox"/> 30 - 44 <input type="checkbox"/> 45 - 59 <input type="checkbox"/> 60+
Gender	<input type="checkbox"/> Male <input type="checkbox"/> Female
Employment	<input type="checkbox"/> Full-time employment <input type="checkbox"/> Part-time employment <input type="checkbox"/> Unemployed
Statistics	<input type="text"/> Height (cm) <input type="text"/> Weight (kg)
Will you have your own bike to use?	<input type="checkbox"/> Yes <input type="checkbox"/> No >



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Continued:

How did you find out about AustCycle?	<input type="checkbox"/> 1 Radio or TV or newspaper
<input type="checkbox"/> 2 Poster or leaflet	<input type="checkbox"/> 3 Magazines, brochures/newsletters
<input type="checkbox"/> 4 Friends/work colleague	<input type="checkbox"/> 5 Community group
<input type="checkbox"/> 6 Email list	<input type="checkbox"/> 7 Other

Your main reason(s) for attending this training program?	<input type="checkbox"/> Improve health
<input type="checkbox"/> Improve cycling skills	<input type="checkbox"/> Improve cycling confidence
<input type="checkbox"/> Find out more about cycling	<input type="checkbox"/> Increase time spent cycling
<input type="checkbox"/> Meet people	<input type="checkbox"/> Other

When was the last time you rode a bike?

last week
 last month
 last year
 longer than a year
 never

How would you describe your current level of confidence about riding (please tick)? 1=Low 6=High

1
 2
 3
 4
 5
 6

How would you describe your current level of confidence about riding in traffic (please tick)? 1=Low 6=High

1
 2
 3
 4
 5
 6

Representations and Warranties: I warrant that I am in good physical condition and have no medical condition, complaint, impairment or ailment that will prevent me from participating in the AustCycle Cycling Training Program or that will be detrimental to my health, safety or physical condition or the health, safety or physical condition of others while participating in an AustCycle Cycling Training Program or while at or near the Program.

Release and Indemnity I hereby release and forever discharge each of AustCycle Pty Ltd, _____ and their officers, directors, employees, agents and contractors and sponsors, from any and all claims, suits, demands, expenses, costs, actions and proceedings of any nature whatsoever including negligence, which I, my executors or administrators or any other person has or might assert against any of them arising from, in relation to, incidental to or by virtue of any injury, loss or damage suffered or sustained in connection with participation in the AustCycle Cycling Training course or at any time when near the AustCycle Cycling Training course. I hereby indemnify and hold harmless, and shall keep indemnified and held harmless, each of AustCycle Pty Ltd, _____ their officers, directors, agents, contractors and sponsors from and against all claims, suits, demands, expenses, costs, actions and proceedings of any nature whatsoever arising from, in relation to or by virtue of:

(1) Any injury, loss or damage sustained by me.

(2) Any injury, loss or damage suffered by any other person as a result of any act, omission, neglect or default on my part, in connection with my participation in the AustCycle Cycling Training course at any time when I am near the AustCycle Cycling Training course. I acknowledge that AustCycle's insurance policy covers me for public liability and personal indemnity whilst participating in an AustCycle Cycling Training course. I agree to wear an Australian Standards approved cycling helmet whilst riding a bike at all times during this period. I agree that I am responsible for my personal accident insurance, ambulance cover and any medical costs not covered by AustCycle's insurance.

I hereby agree to allow the Participant's name, photograph, video, audio recordings, multimedia or film likeness to be used in the media and by AustCycle, the sponsors, or assigns for the purposes of promoting AustCycle, _____, the AustCycle Cycling Training course and the sport of cycling.