



## MEMBERSHIP APPLICATION MEMBERS DETAILS

UNITED TRIKERS AUSTRALIA INC.  
P.O. Box 338  
MACARTHUR SQUARE NSW  
2560  
ABN: 84 804 247 393  
Web: [www.unitedtrikers.com.au](http://www.unitedtrikers.com.au)

Thank you for your interest in joining United Trikers Australia Inc.

### Brief History of United Trikers Australia Inc.

- United Trikers Australia Incorporated was formed as a way for trike owners and people interested in trikes to get together, and share knowledge, information and enjoyment in trikes of all shapes and sizes.
- The club was incorporated under the Department of Fair Trading (DFT), Model Rules of Incorporated Association in 2000.
- The first UTA Inc Newsletter called *THREEDOM!!!*, was published in June 2000 and was sent to each financial member, on a bi-monthly basis.
- UTA Inc adopted a Concise Constitution in July 2008, which follows the model as established by the DFT.
- The aims of the UTA are simple:
  - To provide association and friendship to all trikers and to all persons with a common interest in trikes.
  - To arrange trips and social events and to encourage all members to participate.
  - To establish contact with other clubs.
  - To present a responsible and respectable image of triking to the general public.
  - To be a non-profit making organization.
  - To be non-political.

### Membership Details:

Membership is open to people who have an interest in Triking, **ownership is not a requirement.**

Full membership is only available to persons over the age of 18.

Junior membership is offered only to family members of full UTA Inc members, and is free of charge, once the junior member reaches 18 years then they can join as a full member.

Membership fees are \$20.00 per person for the first year.

Annual renewal date is 31<sup>st</sup> March each year, with an annual renewal fee of \$15.00 per person

### Lodgement:

Membership applications are to be completed and lodged by either mail or email to the UTA Inc Membership Secretary.

By Mail:  
The Membership Secretary  
**UNITED TRIKERS AUSTRALIA INC.**  
P.O. Box 338  
**MACARTHUR SQUARE NSW 2560**

By Email:  
[membershipsecretary1@unitedtrikers.com.au](mailto:membershipsecretary1@unitedtrikers.com.au)

Payments can be made by Cheque or Direct Credit

Make Cheques Payable to: **UNITED TRIKERS AUSTRALIA Inc.**

Bank Account details are: National Australia Bank  
Account Name: United Trikers Australia Inc  
BSB: 082620 Account Number: 171527587

*Please allow 21 days for your application to be processed, before contacting the membership secretary. Should your application be rejected, your membership fee will be returned in full.*



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<b>1. APPLICANTS NAME:</b>		
FAMILY NAME: _____		GIVEN NAMES: _____
FAMILY NAME: _____		GIVEN NAMES: _____
<b>2. RESIDENTIAL ADDRESS:</b>		
Street No. & Name: _____		
Suburb: _____	State: _____	P/Code: _____
<b>3. POSTAL ADDRESS (IF SAME AS RESIDENTIAL ADDRESS LEAVE BLANK)</b>		
Street No. & Name or PO Box No.: _____		
Suburb: _____	State: _____	P/Code: _____
<b>4. PHONE NUMBERS:</b>		
Home Phone No.: _____ ( )		Fax No. ( )
Mobile Phone Numbers: _____		
Applicant 1: _____		
Applicant 2: _____		
<b>5. EMAIL DETAILS:</b>		
Email Address No. 1: _____		
Email Address No. 2:(if applicable) _____		
Do you wish to have your Newsletter and Other Club Correspondence sent to You via Email: <input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>6. FACEBOOK DETAILS:</b>		
UTA has a private member only Facebook page, if you would like to join the page, please provide your Facebook Name: _____		
<b>7. TRIKE INFORMATION:</b>		
Do you currently own, or are looking at purchasing a trike, and if so what type/manufacturer: _____		
<b>8. 1<sup>ST</sup> AID CERTIFICATION:</b>		
Do you currently Hold a Senior 1 <sup>st</sup> Aid Certificate, If Yes, Would You Be Willing To Be Nominated As A Ride Event 1 <sup>st</sup> Aider:	APPLICANT 1	APPLICANT 2
	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Date of Certificate Expiry:	____/____/20____	____/____/20____
<b>9. EMERGENCY CONTACT DETAILS: (PLEASE PROVIDE DETAILS OF AN EMERGENCY CONTACT)</b>		
Name: _____	Relationship: _____	
Home Phone No.: ( ) _____	Mobile No. _____	
<b>10. AUTHORISATION FOR USE OF NAME AND IMAGES</b>		
By becoming a member of UTA Inc, I, hereby give permission and expressly authorise the UTA to include the names and photographic/video images of myself and guests attending UTA Inc Club and Social Events for use in UTA Inc marketing material, including but not limited to the UTA website, newsletter, press releases etc.		

I, certify that I am over the age of 18, and that I agree to abide by the Articles, Rules and Constitution of the United Trikers Australia Incorporated, and agree to conduct myself in the true spirit of UTA Inc.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Official Use Only:  
Date Received: \_\_\_\_\_

Membership Number/s \_\_\_\_\_