



The Sydney Speleological Society Inc

P.O. Box 198

Broadway, New South Wales, Australia

Membership Application

PLEASE PRINT

I,

wish to apply for membership of The Sydney Speleological Society.

I agree to subscribe to the objectives of The Sydney Speleological Society and abide by its Constitution and By-Laws. Furthermore, I am willing to take uttermost care to preserve and protect all natural caves and their fragile ecosystems.

I clearly understand that irresponsible behaviour on my part could endanger my life as well as that of other cavers and undertake to inform the club's trip leader of any conditions, medical or otherwise that could effect the safety of any member of the caving party myself included. I will accept the trip leaders decision to exclude me from an underground trip if the safety of a group so demands.

SIGNATURE

DATE

Please complete the following questionnaire as accurately as possible. All information provided will be kept confidential and will not be released to anyone without your written permission. Your contact details will be published in the Yearbook editions of the Journal of the Sydney Speleological Society available only to club members and subscribers of the Journal.

POSTAL ADDRESS

STREET (or PO BOX)				SUBURB			
STATE	POST CODE	HOME:	MOBILE:	WORK:	E-MAIL:	PHONE & INTERNET	
Would you like to be added to the SSS mail list?						NO	YES

ARE YOU A MEMBER OF ANY OTHER SPELEOLOGICAL GROUP?

NAME OF GROUP:

PERIOD OF MEMBERSHIP:

NO

YES

HAVE YOU ATTENDED ANY CAVING TRIPS?

(LIST DETAILS BELOW)

DATE:	CAVING AREA:	TRIP LEADER:	CAVING GROUP:

CAVING EXPERIENCE

[NONE, LITTLE, SOME, EXTENSIVE]

TOTAL HOURS:	HORIZONTAL:	VERTICAL:	SURVEYING:	RESEARCH PROJECTS:

CURRENT FIRST AID CERTIFICATE?

YEAR:

ATTENDED AN SSS FIELD DAY?

YEAR:

NO

YES

NO

YES

COURSE:

YOUR MAIN INTEREST IN CAVING

[TICK APPROPRIATE]

EXPLORATION	SURVEYING	SCIENCE	CAVE SPORT	OTHER [PLEASE LIST]
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WOULD YOU LIKE TO CREATE SPELEO PROJECTS?

WOULD YOU LIKE TAKING PART IN ON-GOING PROJECTS?

NO

YES

NO

YES