



AUSTRALIAN MOTORCYCLE TRAIL RIDERS' ASSOCIATION. NEW SOUTH WALES BRANCH

161 Fisher Road Marayla NSW 2765 PH: 0411 141 374

Welcome new member,

We are a self-organising group of trail riders. **A.M.T.R.A.** have branches in all states, so if you move or are visiting another state you can still ride with a friendly club that offers you the same style of riding & friendship.

ALL bikes are to be registered and ALL riders to be licensed.

We respect **all** landholders and Government bodies, if you are not meant to be there, we **DON'T** go there, eg (heritage areas).

There are plenty of rides up & down the coast, North & South & we are always looking for new & legal areas to ride, so if you have a good knowledge of an area, you can help by leading a ride.

We have one day rides & weekend rides monthly. Sometimes rides are rescheduled due to bad weather or other unforeseen circumstances.

There are some weekends when you can bring the family to share in the camping experience.

It is **important** that all riders contact the lead rider **one week** before a planned ride and 2 weeks before a weekend ride. This allows for booking of accommodation, fuel, etc to be organised.

We keep rides at a reasonable cost, much lower than the cost of a tour operated ride for a similar ride.

We are a friendly bunch, so a phone call is always welcome.

Bikes must be in **good mechanical** order (Please have a quick ride a day or so before the ride).

****OFF ROAD TYRES ARE A MUST**plus heavy-duty tubes**

Necessary tools: Pump, tubes (at least a front), tyre leavers, a spare spark plug and basic tools.

TO JOIN: Fill in attached membership form, EFT \$100 for your yearly membership and email or post the indemnity form, and payment transaction receipt to the address at the bottom of the form.

MEETINGS: details are emailed out two weeks prior.

Contact Brian (Club Treasurer) on 0411 141 374 or browston@bigpond.com

WELCOME.

A.M.T.R.A. 2026 MEMBERSHIP FORM

Memberships are due on the 1st of February 2026

Name: _____

Email Address: _____

Postal Address: _____

Phone No's

Home: _____

Mobile: _____

Work: _____

Who to contact in emergency: _____

Emergency contact number: _____

Payment \$100

EFT made and receipt attached

AMTRA (NSW) Bank Details

BSB: 062128

Account No.: 00904454

Mail to:

AMTRA
161 Fisher Road
Maraylya NSW 2156.



DEED OF INDEMNITY

AUSTRALIAN MOTORCYCLE TRAIL RIDERS' ASSOCIATION NSW INC. ("AMTRA")

I, (please print name).....

of (address).....

For myself and my successors and assigns, in consideration of AMTRA permitting me to be involved in AMTRA events and trail rides, **I HEREBY AGREE** to indemnify and keep indemnified AMTRA from any claim, cause, action, suit or proceeding which may arise out of or in connection with my involvement in AMTRA events and trail rides, whether such claim, cause, action, suit or proceeding arises from any death or injury or loss of property or otherwise ("the risks") that may be sustained or suffered by me both during transportation to and from the event or trail ride or at the location of the event or trail ride.

I FURTHER HEREBY AGREE AND COVENANT to indemnify all members of AMTRA and trail ride supervisors and leaders and other participants in the trail ride in relation to any claim, cause, action, suit or proceeding with respect to all of the risks and I agree that I shall not bring, either in my name or on behalf of any third party, any claim, cause, action suit or proceeding against AMTRA, its members, trail ride supervisors and leaders and other participants in the trail ride with respect to any of the risks.

I ACKNOWLEDGE that trail bike riding is an inherently dangerous activity and that I have chosen of my own free will to undertake the trail ride and that I have conducted my own investigations as to the safety and suitability of the trail ride that I am about to undertake with AMTRA **AND I FURTHER HEREBY COVENANT AND AGREE** that I have the requisite skills, ability, and equipment to undertake the trail ride proposed.

I freely signed this document without compulsion and understand that I and I alone accept responsibility for any loss, damage, injury, or death which may be suffered by me as a result of my participation in the trail ride or transport to or from the trail ride or whilst on location at the site of the trail ride or through the duration of the day in which the trail ride occurs.

The document shall be read and construed as a Deed.

IN WITNESS, WHEREOF this indemnity has been executed on

the.....day of.....2026

SIGNED:.....

in the presence, of

Signature:

Witness to Print Name and Address:

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