



Velo Club Cumbria and Lakeland Sprinters

Membership Application Form 2010

To make things easier, if you are an existing member (i.e. you were a member in 2009) – just put your name and anything that has changed e.g. phone number, email address.

Forename _____ Surname _____

Address _____

_____ Date of Birth _____

_____ e-Mail Address _____

Postcode _____ Phone _____

I enclose my annual subscription of:

Please tick

£2 (Under 16)

£8 (Over 18)

£5 (Associate)

£4 (Age 16 - 18)

£5 Second Claim

(An Associate is a non-racing member)

IMPORTANT NOTICE – to race on the roads you must have Third Party insurance. It is your responsibility to ensure that you have Third Party Insurance cover and that you are covered for racing on public roads.

British Cycling members and CTC members will have acceptable insurance by virtue of their membership. If you have either of these, please provide your membership number below. Other organisations (e.g British Triathlon Association) may also have acceptable insurance arrangements – please check with your organisation first. Otherwise you will need to join British Cycling, CTC or other suitable body and make sure that you are covered.

Back for 2010 and only £12! It's back – you can apply for individual CTC Affiliated Membership at a discounted rate through VCC again. Simply fill in the box below and add £12 to your cheque for your VCC membership fee.

I wish to apply for CTC Affiliate membership through Velo ClubCumbria. I enclose payment of £12.

Signed.....

Date.....

If you ONLY ride time trials organised by Cycling Time Trials (CTT) affiliated clubs then provided you are a member of a CTT affiliated club (such as VC Cumbria, Border City Wheelers, etc) you are insured for Third Party claims whilst you compete in the event since part of your race fee is paid to as a levy to CTT to provide 3rd party insurance. You won't be covered at any other time, though. See the VC Cumbria website for more info on insurance.

Number:

British Cycling Licence

OR CTC:.....

OR Other (give details)

Please make cheques payable to **Velo Club Cumbria**

Vets Category 40+ 50+ 60+ New Member

Signed _____

Date _____

Please send this completed form to: Tim Houghton, Simon Kell, Haile, Egremont, Cumbria CA22 2PF

(See next page for parent/guardian consent for riders under the age of 18)



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PARENTAL/GUARDIAN CONSENT
(FOR RIDERS UNDER THE AGE OF 18)

I,

Name _____

UNDERSTAND AND AGREE THAT MY SON/DAUGHTER PARTICIPATES IN VC CUMBRIA ACTIVITIES ENTIRELY AT HIS/HER OWN RISK. I HAVE CONSIDERED AND UNDERSTAND THE NATURE OF SUCH EVENTS AND HAVE DISCUSSED THEM WITH MY SON/DAUGHTER. I AM SATISFIED THAT MY SON/DAUGHTER IS SUFFICIENTLY RESPONSIBLE AND COMPETENT TO ASSUME THE FULL AND ENTIRE RESPONSIBILITY FOR HIS/HER SAFETY WHILST ENGAGED IN VC CUMBRIA ACTIVITIES. I AGREE THAT MY SON/DAUGHTER SHALL PARTICIPATE IN VC CUMBRIA ACTIVITIES WITHOUT ANY LIABILITY WHATSOEVER ON THE PART OF THE PROMOTER, PROMOTING CLUB, OFFICIALS OR MEMBERS IN RESPECT OF ANY INJURY, LOSS OR DAMAGE HOWEVER CAUSED. I CONFIRM THAT MY SON/DAUGHTER AS A COMPETITOR DOES NOT HAVE ANY DISABILITY OR MEDICAL CONDITION, PHYSICAL OR MENTAL THAT COULD AFFECT HIS/HER ABILITY TO TAKE PART IN VC CUMBRIA ACTIVITIES. IF OTHERWISE I SHALL INFORM THE VC CUMBRIA OFFICIAL IN CHARGE OF ACTIVITIES.

Signed _____

Date _____