NORTH DOWN CYCLING CLUB YOUTH / JUNIOR MEMBERSHIP APPLICATION FORM

MEMBERSHIP YEAR 2015

INTENDED "CYCLING IRELAND" MEMBERSHIP, if any (please tick/circle)

Non Competition	Limited Competition	Full Competition
Please tick if first time app	licant	
PERSONAL DETAILS :-	-	
First Name	Surname	
DATE OF BIRTH		
Address		_
		_
		_
Post Code		_
Contact Telephone Numbe	r :	
E-Mail Address of Youth M	Member:-	
Signature of Youth Member	er:	
Parental Consent (for an	y applicant under 18)	
I consent to my son / daug	hter becoming a member of North I	Down Cycling Club
Signature		
PRINT NAME		
Date		
Parent email address		

Note: Parental Consent form <u>must</u> be completed for all under 18's – applications cannot be accepted without a fully completed Parental Consent Form

Subject to Ratification by Club Committee. Completed under 18 Forms to be returned to :-Alison McMullan, 27 Cove Avenue, Groomsport, BT19 6HQ