



TEAM

ISLE OF MAN

2012 APPLICATION FOR MEMBERSHIP

COMPETITOR'S NAME, ADDRESS, Postcode, TEL NO. Home, Work, DATE OF BIRTH, MALE, FEMALE, Does your bike have stabilisers?

I hereby apply for membership of Royal London 360 Isle of Man

SIGNED BY (competitor, parent or guardian)

For information purposes only please indicate If you suffer from any medical condition e.g. Asthma, diabetes

PARENTAL CONSENT. Valid at all events promoted by Royal London 360 and Manx Viking Wheelers. To be signed by parent or guardian of the entrant under the age: of 18. I (name and address of guardian or parent)

being the parent or guardian of born on

- Hereby agree to his/her participation in the events under the rules and regulations of the British Cycling Federation (B.C.F) and DECLARE the following: 1. I understand and agree that my said son/daughter participates in events promoted under the federation's rules and regulations entirely at his/her own risk... 2. 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 full and entire responsibility for his/her own safety whilst engaged in competition under B.C.F. rules. 3. I understand that competitors over 16 years of age are permitted to compete on the public highway and must therefore assume full and entire responsibility for their own safety in relation to other traffic. I understand and have emphasised to my son/daughter that the function of the marshals in such events is to do no more than indicate the direction the rider should take and that the responsibility for safety negotiating corners, turns and other hazards must rest with the rider alone. 4. I confirm that my son/daughter does not have any disability or medical condition, physical or mental, which could affect his/her ability to ride safely as a racing cyclist. I understand that I must notify the secretary of the club at once if at any time my son/daughter becomes subject to a disability or medical condition, physical or mental, which could affect his/her ability to ride safely as a racing cyclist.

SIGNED (By parent or guardian) Date:

I also give permission for my son/daughter's photograph to be taken and used on the club's website and in press coverage.

Signed (By parent or guardian) Date: