

Title..... First Name.....Surname.....Date of birth:.....
 Address:.....
Postcode:..... Membership no: (if known).....
 Tel (eve):.....Tel (day):.....Mobile:.....
 Email address:..... Gender: M F Nationality.....
 Ethnic Origin: White Mixed Race Asian or Asian British Black or Black British Chinese Other Registered disabled: Yes No
 1st Claim Club (if applicable):.....Alternative Club:.....
 Please tick this box if you do not wish to receive mailings from other companies/organisations

1. MEMBERSHIP: All cards will be sent to the member's 1st claim club/team secretary. Please allow up to 14 days for processing

	GOLD	SILVER	BRONZE	Notes: For access to events with ranking points a Full Racing Licence is required. Membership allows entry to designated events only. Junior= Born in 1990/1991 Youth= Born between 01/01/1992and 31/12/95 Under 12= Born in 1996or later
JUNIOR	£45.00 <input type="radio"/>	£23.00 <input type="radio"/>	£13.00 <input type="radio"/>	
YOUTH	£33.00 <input type="radio"/>	£13.00 <input type="radio"/>		
UNDER 12	£26.00 <input type="radio"/>	£7.50 <input type="radio"/>		

1.b Quarterly Racing Calendar Magazine for four issues (Free for Gold members) **£12.50**
2. RACING LICENCE Valid Jan 1st to Dec 31st 2008. Enables holder to enter competitive events and gain ranking points. Available to Gold and Silver members only. Your racing licence must run concurrent with your membership to ensure you are a valid member whenever you take part in a competitive event.

JUNIOR £12.50
YOUTH FREE
UNDER 12 FREE
3. Payment: a) I enclose a cheque payable to British Cycling b) Please debit my Credit/debit card **TOTAL DUE**

Card Holder:.....Number/...../...../.....Security Code.....

Valid from:...../.....Expiry Date:...../..... Issue no:.....

4. Agreement to be completed by all members

I assume exclusive responsibility for the present application and the use to be made of the racing licence and undertake to return my licence as soon as a situation occurs modifying substantially the circumstances existing at the time of the licence application.
 I hereby undertake to respect the Constitution, Byelaws and Regulations of the Union Cycliste Internationale (UCI), its Continental Confederations and its National Federations. I declare having read or having had the opportunity to read such constitution or regulations.
 I will participate in cycling competitions or events in a loyal and sporting manner. I will submit to disciplinary measures taken against me, and will take any appeals and litigation to the authorities provided for in the Regulations. I accept (CAS) as the only competent jurisdiction of appeal in the cases provided for by the regulations and in compliance with the terms thereof. I accept that the decisions of CAS shall be final and binding and not subject to appeal. With that reservation, I shall submit any litigation with the UCI exclusively to the tribunals at UCI headquarters.
 Should I be required to participate in an anti-doping control test conducted under BCF/UCI Anti Doping Regulations, I agree to submit to those tests and comply with and to be bound by the UCI anti-doping regulations, the World Anti-doping regulations of other competent instances as foreseen by the UCI Regulations and the World Anti-Doing code, provided such regulations comply with the World Anti-Doping Code.
 I agree that the results of the analysis be released to the public and communicated in detail to my Club/Team/TradeTeam or to my coach or doctor.
 I undertake to submit any objections concerning drug abuse to the BCF Board / Appeals Panel, whose decision I shall accept as final.
 I accept that all urine samples taken become the property of the BCF/UCI and that the BCF/UCI may have them analysed, notably for the purpose of research and information on health protection.
 I agree to my doctor and/or the doctor of my Club/Team communicating to the BCF, on its request, the list of medicines I have taken and treatment I have undergone before any given competition or cycling event.
 I AGREE TO ABIDE BY THE BYE-LAWS & REGULATIONS AND HAVE READ AND AGREE TO ABIDE BY THE ABOVE DECLARATIONS.

Name.....Signed.....

5. Parental Consent This section must be completed by your parent/guardian

I (name) Of (address) being the parent / guardian of the abovementioned rider. Understand and agree that my son/daughter participates in events promoted under the Federation's rules and regulations entirely at his/her own risk. I have considered and understand the nature of such events and have discussed them with my son/daughter. 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 British Cycling Federation Regulations. Understand that competitors over 16 years of age are permitted to compete on the public highway and must there assume full and entire responsibility for their own safety in relation to other traffic. Understand and have emphasised to my son/daughter that the function of marshals in such events is to do no more than indicate the direction the rider should take and that the responsibility for safety whilst negotiating corners, turns and other hazards must rest with the rider alone. Understand further and have impressed upon my son/daughter that all competitors in events on the open road must observe the law of the land relating to road travel.
 Agree that my son/daughter shall participate in such events without any liability whatsoever on the part of the promoter, promoting club, the British Cycling Federation, or any club or organisation affiliated thereto or their officials or members in respect of any injury, loss or damage suffered by him/her, provided that this does not exclude the liability of any such party for death or personal injury arising from that party's negligence. 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. Understand that I must notify the General Secretary of the Federation at once if 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. **I AGREE FOR MY SON/DAUGHTER TO BE BOUND BY ALL POLICIES AND PROCEDURES OF BRITISH CYCLING, INCLUDING ITS BYELAWS, TECHNICAL REGULATIONS, CODE OF CONDUCT, EQUALITY POLICY, CHILD PROTECTION POLICY AND ANTI-DOPING POLICY, AS SET OUT ON THE BRITISH CYCLING WEBSITE WWW.BRITISHCYCLING.ORG.UK**

Signed (Parent/Guardian) Date :

Witness Name & Address (PRINT)

Signed (Witness) Date :