

North West Recreational Cycling Group Inc.

Application for Membership

Name:

Address:

.....

Phone: Home Work

Mobile Email

Select Membership Category

Senior

Junior (Under 18)
(Signature of parent / guardian required)

Family Other Family Members:

- | | |
|----|----|
| 1. | 2. |
| 3. | 4. |

Membership Survey

Age: (Please circle) Under 18 18-30 30-40 40-50 50-60 60-70 70+

Gender: Male Female

I currently ride: (Please circle one or more)

A road Bike Mountain Bike Hybrid Folding Bike Recumbent Other

In applying for membership of the North West Recreational Cycling Group Inc. (NWRCG), I recognise that the group accepts no responsibility for me when taking part in the group's activities.

...../...../.....
(Applicant's Signature)