



2010 APPLICATION FORM FOR NON-CUCHULAINN CC MEMBERS

NAME:	
CLUB:	
Mobile:	
Email:	
Do You Open Race:	No: <input type="checkbox"/> Yes: <input type="checkbox"/> (Cat:)
Cycling Ireland Licence Type:	
Cycling Ireland Licence Number:	

I understand and agree that I participate in this event entirely at my own risk, that I must rely on my own ability in dealing with all hazards and that I must ride in a manner which is safe for myself and all others. I am aware that when riding on a public highway the function of the marshals is only to indicate direction and that I must decide whether the movement is safe. I agree that no liability what so ever shall attach to the Promoter, Promoting Club, Race Sponsor, Cycling Ireland, any Sub-Committee of Cycling Ireland, any Race Official or any Member of the Promoting Club in respect of injury, loss or damage suffered by me in or by reason of the event, however caused.

I confirm that I am a member of Cycling Ireland and hold a current licence that allows me to partake in club competitions

SIGNATURE: _____ DATE: _____

ENTRY FEE: €20.00