



2009 CLUB APPLICATION

Club Name: _____
Contact Phone: _____
Contact Email: _____

Please check all that apply:

Road Track MTB Touring Trail Access BMX

Main Sponsors: _____

President: Last Name: _____ First Name: _____

Mailing Address: _____ City: _____

Postal Code: _____ Home Phone: _____

Work Phone: _____ Fax: _____

Email address: _____ Website: _____

Club Coach: _____ Club Commissaire: _____

Please enclose a current list of the club's executive with contact information.

Jersey Design: Please enclose a clear, colour photograph of the front, back and side views of your club jersey if your members intend to race in any category.

Declaration

On acceptance as a club of both the provincial cycling association and the Canadian Cycling Association, the applicant agrees to abide by the rules, regulations and procedures of Bicycle Nova Scotia and the Canadian Cycling Association.

Club President Signature: _____ Date: _____

2009 Club Fee \$110

A list of your club's events must accompany your application.

Cheques are payable to: Bicycle Nova Scotia

5516 Spring Garden Road, 4th Floor, Halifax, NS, B3J 1G6
Phone: 902.425.5450; Fax: 902.425.5606; email: staff@bicycle.ns.ca
www.bicycle.ns.ca