



Livingston Cycling Club Membership Application/ Renewal Form

NAME 		
ADDRESS		
DATE OF BIRTH		
PHONE NUMBER		
EMAIL ADDRESS		
EMERGENCY CONTACT DETAILS		_
MEMBERSHIP FEE £20.00 ((Payable on application)	
By signing this form I am agreeing to a this form will be used to enter me in Cycling Club and will enable access to I also give consent for my submitted information to be available to club business.	nto the British Cycling Website as a o 1 years discounted 'Ride Membersl information to be held on the Club's	n member of Livingston hip' with British Cycling. s data files and for this
Signed:	Date:	
For Official Use Only		
Membership Number Received by Club Official Signed	Date	