

Cobourg Cycling Club

Establish 1972

MEMBERSHIP FORM 2008

Name : _____

Date of Birth: _____

Address

Street: _____

Town: _____

Postal Code: _____

Email: _____

Cycling Interest:

- | | |
|--------------------------------------|---------------------------------------|
| <input type="checkbox"/> Touring | <input type="checkbox"/> Time Trials |
| <input type="checkbox"/> Road Racing | <input type="checkbox"/> Du/Triathlon |

OCA Waiver Signed

Membership Fee:

- | | |
|--|---------|
| <input type="checkbox"/> Active Member: | \$45.00 |
| <input type="checkbox"/> Club Supporter: | \$15.00 |

Signature: _____

Date: _____

