



1. PERSONAL INFORMATION (PLEASE PRINT CLEARLY)

Last Name	First Name	Date of Birth (MM/DD/YY) ____/____/____	Age as of Dec. 31, 2015 ____ <input type="checkbox"/> Female <input type="checkbox"/> Male
Street Address	City, Province	Postal Code	Name of Affiliated Club
Phone Number	Emergency Contact and Phone #:	Citizenship	Email Address

2. UCI LICENSE SELECTION

Mountain Bike

<input type="checkbox"/>	SPORT
<input type="checkbox"/>	EXPERT
<input type="checkbox"/>	ELITE

<input type="checkbox"/>	UNDER 9
<input type="checkbox"/>	UNDER 11
<input type="checkbox"/>	UNDER 13
<input type="checkbox"/>	UNDER 15
<input type="checkbox"/>	UNDER 17

<input type="checkbox"/>	JUNIOR
<input type="checkbox"/>	SENIOR
<input type="checkbox"/>	MASTER 30+
<input type="checkbox"/>	MASTER 40+
<input type="checkbox"/>	MASTER 50+

2015 UCI / CCA Membership Application

Road/Cyclo-Cross

<input type="checkbox"/>	UNDER 11
<input type="checkbox"/>	UNDER 13
<input type="checkbox"/>	UNDER 15
<input type="checkbox"/>	UNDER 17
<input type="checkbox"/>	JUNIOR

<input type="checkbox"/>	SENIOR
<input type="checkbox"/>	MASTER 30+
<input type="checkbox"/>	MASTER 40+
<input type="checkbox"/>	MASTER 50+

CATEGORY:	
<input type="checkbox"/>	1 PROV / NAT TEAM RIDER
<input type="checkbox"/>	2 TOP PROVINCIAL RIDER
<input type="checkbox"/>	3 TOP PROV JR, RIDER
<input type="checkbox"/>	4 COMP/RECREATIONAL
<input type="checkbox"/>	5 BEGINNER

MCA WAIVER MUST ALSO BE SUBMITTED

3. GENERAL MEMBERSHIP OR

4. UCI / CCA LICENSE FEE (includes general membership)

(Not to be used in conjunction with a UCI License)

"A" GENERAL MEMBERSHIP	COST	<input checked="" type="checkbox"/>
GENERAL MEMBERSHIP	COST TBA	

PLEASE NOTE:

IF APPLYING FOR A TECHNICAL LICENCE YOU REQUIRE AT MINIMUM A GENERAL MEMBERSHIP "A" ABOVE

Please contact the MCA office with any questions regarding your registration. Phone: 204-925-5686/Email: cycling.ed@sportmanitoba.ca

UCI / CCA Licensed Membership

"B" LICENSE	COST	<input checked="" type="checkbox"/>
ADULT LICENSE (17 +)	COST TBA	
Under 17 LICENSE	COST TBA	
"C" Citizen License	COST	<input checked="" type="checkbox"/>
1 st time license (Novice category)	TBA	
Technical License (Organizer). Requires "A" or "B"	No Cost	<input checked="" type="checkbox"/>
ROAD/CYCLO-CROSS ORGANIZER	GM Required	
MOUNTAIN Bike ORGANIZER	GM Required	
Technical only Requires "A" of "B"	Comm Level	Coach Level
ROAD /CROSS		
MOUNTAIN BIKE		

Note:
 License rates above include taxes and processing fee. A completed Membership form along with payment and a **signed and dated waiver** must be returned to the MCA office on the first business day following the race to ensure the participants license and insurance is processed prior to the next race. A photo will be required for all UCI license types before the license can be printed. Please contact the MCA office to make arrangements.

FORM OF PAYMENT: (Please circle)

Cheque or Cash
 Collected by: _____
 Date of Purchase: _____