



Name: \_\_\_\_\_

Address: \_\_\_\_\_

City / Province / Postal Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

MCA License Number (CAN): \_\_\_\_\_

Fee: **Cash / Cheque (Made payable to: Manitoba Cycling Association)**

Amount Paid: \_\_\_\_\_

What you are looking for from the women's training:

What kind of cycling training have you done in the past?

None      Some      Sufferfest Type Videos

Coached program      Previous years women's program?

Success of your cycling season this summer:

Past Race Experience, or Event Experience:

Questions ??