



PO Box 7025 Newcastle 2940
 Tel: 034 3154055 Fax: 086 6339931 E-mail: club@triathloncycles.co.za

Membership Application Form 2010

Club Details: N-KZN Triathlon Cycles Club
 PO Box 7025
 Newcastle , 2940

CLUB BANK ACCOUNT: FIRST NATIONAL BANK
ACC NO: 6216 295 3288
BRANCH CODE: 270324

Surname: _____ **Volle Name/Full Name** _____
Postal Address: _____ **Postal code:** _____
Tel nr: _____ **Mobile no :** _____ **Gender** M / F
E-mail: _____ @ _____ **Town:** _____
ID nr: _____ - _____ - _____ **Emergency contact-name:** _____
Medical Aid name: _____ **Medical Aid nr:** _____
Emergency tel: _____ **Champion Chip nr:** _____ **Winning time nr:** _____

2010 CLUB FEES

Annual Membership fee : R180 R _____
Additional Family Member:
Annual Membership fee : R130 R _____
Junior Membership fee (scholar) : R100 R _____

Please Note : Above fees exclude CSA license fees

CSA licensing – may be done online at <http://cms.cyclingsa.com> please see attached form for licensing and form for applicable fees. Cost may vary ,payable to CSA .

If CSA online licensing is done by the club – fee of R40 will be charged (paid with license fee)R _____

Club clothing:

Short sleeve shirt (White – Road) XXS to 5XL	Size _____	No. _____	@ R180ea	R _____
Short sleeve shirt (Black – MTB) XS to 5XL	Size _____	No. _____	@ R180ea	R _____
Long sleeve shirt/Rain jacket XXS to 5XL	Size _____	No. _____	@ R220ea	R _____
Arm warmers XS - XL	Size _____	No. _____	@ R100pr	R _____
Cycle shorts XS – 4XL	Size _____	No. _____	@ R180ea	R _____
Cycle BIB's XS – 4XL	Size _____	No. _____	@ R250ea	R _____
Tri suits (limited stock available. Can be custom ordered for each athlete with name printed)				
TOTAL DUE				R _____

New

Conditions: I, _____ agree to abide by the rules and regulations of Cycling South Africa(CSA), Triathlon South Africa(TSA) -for Triathletes - and N-KZN Triathlon Cycles Club, the sponsors or the or the sport of cycling and triathlon into disrepute in anyway whatsoever. I hereby accept that cycling & triathlons are a dangerous sport and I am aware of all associated dangers, I will in no way whatsoever hold the sponsors, club administrators or sports bodies responsible far any injury suffered while cycling or participating in any cycling events.
 I confirm all the above details to be correct and accept all terms and conditions as stipulated.

Signature: _____ **Date:** _____

Chairman: Chris Van Der Linde - 034 3154055 Secretary: Jody Mitchell – 083 293 2133 Treasurer: Ken Vorster – 082 821 8004

