

Guest Registration Form

Date

Name (please use block capitals):

Address

.....

Postcode

email address

Mobile no.

Emergency contact details:

Name

tel

Relationship to rider

Any relevant medical conditions

Disclaimer

I agree that I understand and will abide by the terms and conditions required by Cranleigh Cycling Club for the safe participation in this activity and to act responsibly and adhere to the rules of the road and countryside. Marshals, if they are used, are solely to indicate the direction and it is my responsibility to ensure that any manoeuvre is carried out safely. I hereby maintain that I am fit and healthy enough to participate in the activity described above and my cycle is in a safe, legal and roadworthy condition. I also accept that Cranleigh Cycling Club cannot be held responsible for any personal injury, accident, loss, damage or public liability during the event.

Name: Date: Signature:

Cranleigh Cycling Club rides are covered by Organisers' Public Liability Insurance and all Cranleigh Cycling Club members are covered by third party insurance, Riders who are not members of the organisation are advised to either join British Cycling, Cycling UK, or obtain their own insurance.
Cranleigh Cycling Club will not disclose the information on this form to any other organisation. If you do not want any photographs used, please notify the event organiser.