

Chiltern 1st XV MTBC Membership Application Form

General

Name:

Address

Phone number (home):

Phone number (mobile):

Email address:

Age:

Blood Group:

Allergies:

Fitness: None / Some / Pie Eater / XC Jayboy / Mountainbiking God
Indicate as applicable.

C1XV key questions

Favourite UK Trails:

Favourite Worldwide Trails:

Bike(s) owned:

Dream Bike:

Favourite Tipple:

Most Admired Celebrity Norks:

Emergency Contact Details

Name:

Mobile no:

Home no:

Address:

Question:

Do you agree that your details are kept in electronic form by the Chiltern 1XV MTBC? Yes/No

Signed.....

Print Name.....

Date.....

Please enclose a cheque for **£10** made payable to **Chiltern 1xv MTBC.**

C1XV Membership Secretary

11 Wingate Ave

High Wycombe

HP13 7QP

BUCKS