



REGISTRATION FORM INDIVIDUAL 25 July 2020

(capital letters)

To accompanied by the regulation to :
Office du Tourisme du Haut Béarn – La Pierre-Jacques en Barétous - 64570 ARETTE –
France
☎ 0033559889538

First Name Lastname
Address
Post Code/Zip City
Country Birthdate Sex. M F
Tél. Mobile E-mail@.....

If you are 17 years old and not major at July 25th 2020, you must then provide a parental consent

LICENCIÉE with medical certificate: Please join a valid license 2020 copy (recto-verso)

UCI UCI Affiliated Federation OTHER

License n° Club

NON-LICENCEE

COMPULSARY: Please join a valid medical certificate (accepted photocopy) clearly mentioning a clause of « **cycling competition's no-counter-indication** ») with a minimum of 12 months validity.

Please note the port of a rigid helmet shall be binding.

Person to prevent in case of accident:

First Name Lastname
Address
Tel Mobile

Entry fees: Including meal of showers and batch.

		Before July 11		From July 11th to July 25th
		Licenciee UFOLEP	Other	all participants
La Pierre-Jacques	159 km	<input type="checkbox"/> 36 €	<input type="checkbox"/> 39 €	<input type="checkbox"/> 55 €
Issarbe - la Hourcère	114 km	<input type="checkbox"/> 36 €	<input type="checkbox"/> 39 €	<input type="checkbox"/> 55 €
Rando VAE & Cyclo	67 km	<input type="checkbox"/> 20 €	<input type="checkbox"/> 20 €	<input type="checkbox"/> 25 €

Village Hall, Aramits.

Saturday 24th July from 4pm until 9pm. Registration in person and collection of tabards and micro chipped ankle bands.
Sunday 25th July from 6 : 30 am until 8 am. Collection of tabards and micro chipped ankle bands

Compagnon meal (12€) : Quantityx 12 € =.....€ Total€

Payment : Bankcheck (Payable to : **A.S. Barétous Cyclisme**) Cash

I hereby declare having taken knowledge of the rules of the 2020 Event with which I shall comply and bind myself to respect the chart "ECO CYCLO"

1- Nature is beautiful and the road is not a garbage can. In all circumstances, promenade, training or competition, I shall retain my waste and wrappings until I can get rid of them where it is allowed.

2- I respect the Highway Code and my helmet shall always be my most trusted companion.

3- Cycling is a wonderful sport, excellent for health and I never will break a run of good luck by taking ill-omened or forbidden medicine.

Made at.....the...../...../2020 Signature required

MEDICAL CERTIFICATE

FIRST NAME

Lastname

Adress

.....

City

Post Code/Zip

Birthdate/...../..... Sex. M F

I herunder ,.....

Doctor in Medecine, certify That the medical examination practiced this day on

Mr Ms Miss

has not highlighted any indication against the practice of cycling competition.
(*n'a pas mis en évidence de contre indication à la pratique du cyclisme de compétition*)

Made at....., the.....

Stam and signature of the consultant