

NEPAL CYCLING ASSOCIATION

Rider License Form 2017

PHOTO PSSPORT SIZE

First Name	Middle Name:	Family Name:
Permanent Address		
Correspondence Address		
Date of Birth	Nation	ality
Gender: Male: Fel	male: Other:	Blood Group:
P. O. Box No	Office/	Tel No.:
Mobile No	E-mail	
Tel. Home	Emerge	ency Contact Details:
Emergency Contact Details		
Associated District/Club:		
Name / Brand of MTB Riding:		
I hereby apply for NCA Rider Membership. I agree to respect and follow the constitution rules and ethics of Nepal Cycling Association (NCA) and International Cycling Union (UCI). I have enclosed annual membership fee 500 rupees along with this application.		
Signature		Date
Official Use [For NCA]		
Rider License Number:	Ар	proved Date:
Office Stamp and Signature:		
Note: Membership Valid for 1 Year from January 1st to December last (Require clear citizenship copy)		